

THIRTY-EIGHTH ANNUAL REPORT

OF THE

GENERAL BOARD OF COMMISSIONERS IN LUNACY FOR SCOTLAND.

Presented to both Houses of Parliament by Command of Her Majesty.



EDINBURGH:

PRINTED FOR HER MAJESTY'S STATIONERY OFFICE

By NEILL & CO., Old Fishmarket Close.

And to be purchased, either directly or through any Bookseller, from
JOHN MENZIES & CO., 12 HANOVER STREET, EDINBURGH, and
90 WEST NILE STREET, GLASGOW; or
EYRE & SPOTTISWOODE, EAST HARDING STREET, FLEET STREET, E.C.; or
HODGES, FIGGIS, & CO., LIMITED, 104 GRAFTON STREET, DUBLIN.

1896.

THIRTY-EIGHTH ANNUAL REPORT

OF THE

GENERAL BOARD OF COMMISSIONERS IN LUNACY FOR SCOTLAND.

Presented to both Houses of Parliament by Command of Her Majesty.



EDINBURGH:
PRINTED FOR HER MAJESTY'S STATIONERY OFFICE
By NEILL & CO., OLD FISHMARKET CLOSE,

And to be purchased, either directly or through any Bookseller, from
JOHN MENZIES & CO., 12 HANOVER STREET, EDINBURGH, and
90 WEST NILE STREET, GLASGOW; or
EYRE & SPOTTISWOODE, EAST HARDING STREET, FLEET STREET, E.C.; or
HODGES, FIGGIS, & CO., LIMITED, 104 GRAFTON STREET, DUBLIN.

1896.

CONTENTS OF THE REPORT.

	PAGE
Departmental changes—Appointment of Sheriff Cheyne, . . .	ix
I.—NUMBER OF THE INSANE ON 1ST JANUARY 1896.	
Number of Lunatics on 1st January 1896, . . .	ib.
Quinquennial Retrospect not given in this Report, . . .	x
II.—STATISTICS OF LUNACY FOR THE YEAR 1895.	
Changes in the Number and Distribution of the Insane during the year,	x
Changes from Pauper to Private Class, and <i>vice versa</i> , . . .	xii
Number placed on and removed from Register, . . .	ib.
Patients in Establishments,	xiii
Admissions to Establishments,	ib.
(1) <i>Direct under Sheriff's Order, Sanction of the Board, or</i> <i>Certificate of Emergency,</i>	ib.
(2) <i>By transfer,</i>	ib.
(3) <i>Voluntary,</i>	xiv
Discharges from Establishments,	ib.
(1) <i>Recovered,</i>	xv
(2) <i>Unrecovered,</i>	ib.
Deaths in Establishments,	xvi
Removals from Establishments on Probation,	xvii
III.—ESTABLISHMENTS FOR LUNATICS.	
Distribution of Lunatics in Establishments,	xix
Orders granted by Sheriffs during the Year,	ib.
Licences granted by the Board to Establishments,	ib.
Results of Treatment in Establishments,	xx
Causes of Death in each Establishment,	ib.
Changes among Attendants and Servants,	ib.
Escapes from Asylums,	ib.
Accidents in Asylums,	xxi
Progressive History of Patients First Admitted to Establish- ments in 1868,	xxii

IV.—PRESENT CONDITION OF ESTABLISHMENTS.

Different Classes of Establishments,	xxiv
--------------------------------------	------

(a) *Royal and District Asylums—*

Condition of Aberdeen Royal Asylum,	xxv
... Argyll and Bute District Asylum,	ib.
... Ayr District Asylum,	ib.
... Banff District Asylum,	xxvi
... Crichton Royal Institution, Dumfries,	ib.
... Dundee Royal Asylum,	xxvii
... Edinburgh Royal Asylum,	ib.
... Elgin District Asylum,	xxviii
... Fife and Kinross District Asylum,	ib.
... Glasgow Royal Asylum,	ib.
... Haddington District Asylum,	ib.
... Inverness District Asylum,	xxix
... Kirklands Asylum,	ib.
... Lanark District Asylum,	ib.
... Midlothian and Peebles District Asylum,	xxx
... Montrose Royal Asylum,	ib.
... Murray's Royal Asylum, Perth,	xxxi
... Perth District Asylum,	ib.
... Roxburgh District Asylum,	ib.
... Stirling District Asylum,	xxxi

(b) *Private Asylums—*

Condition of Mavisbank Asylum,	ib.
... Mollendo House Asylum,	ib.
... Saughton Hall Asylum,	ib.
... Westermains Asylum,	ib.
... Whitehouse Asylum,	xxxi

(c) *Parochial Asylums—*

Condition of Barony Parochial Asylum,	ib.
... City of Glasgow Parochial Asylum,	ib.
... Govan Parochial Asylum,	ib.
... Greenock Parochial Asylum,	ib.
... Paisley Parochial Asylum, Riccartbar,	xxxi
... Paisley Parochial Asylum, Craw Road,	ib.

(d) *Lunatic Wards of Poorhouses—*

Condition of Aberdeen East (St Nicholas) Poorhouse,	ib.
... Buchan Poorhouse,	ib.
... Cunninghame Poorhouse,	ib.
... Dumbarton Poorhouse,	ib.
... Dundee East Poorhouse,	xxxi
... Dundee West Poorhouse,	ib.
... City of Edinburgh Poorhouse,	ib.
... Hamilton Poorhouse,	ib.
... Inveresk Poorhouse,	ib.
... Kincardine Poorhouse,	ib.

CONTENTS OF THE REPORT.

v

	PAGE
Condition of Linlithgow Poorhouse,	xxxv
... Aberdeen West (Old Machar) Poorhouse,	ib.
... Old Monkland Poorhouse,	xxxvi
... Perth Poorhouse,	ib.
... Wigtown Poorhouse,	ib.

(e) *Training Schools for Imbecile Children—*

Condition of Baldovan Institution,	ib.
... Larbert Institution,	ib.

(f) *Establishment for State and Criminal Lunatics—*

Condition of the Lunatic Department of H.M. General Prison at Perth,	xxxvii
---	--------

V.—LUNATICS IN PRIVATE DWELLINGS.

All Pauper Lunatics but not all Private Lunatics in Private Dwellings are under Jurisdiction of Board,	xxxviii
Private Lunatics in Private Dwellings,	xxxix
Pauper Lunatics in Private Dwellings,	ib.
General Reports on Visitation of Patients,	ib.
Private Dwellings licensed for the Reception of more than two Pauper Lunatics,	xli
Aggregations of Pauper Patients in certain Localities,	xliii
Fatal Injury to a Child by a Patient at Giffordtown, Fifeshire,	xliv
Complaints from certain persons in Innerleith, Collessie, Fifeshire,	xlvi

VI.—INSTRUCTIONS AND CIRCULARS ISSUED BY THE BOARD.

Re-issue of Instructions to Inspectors of Poor,	xlvi
Circulars as to Restraint and Seclusion,	ib.
Circular restricting growth of number of Patients in certain Parishes of Fife,	ib.

VII.—POSITION OF DISTRICTS.

List of Districts and of the Counties which form them, and Remarks on their Position,	xlvi
--	------

X VIII.—CAUSES OF DEATH OF PATIENTS IN ASYLUMS.

Examination of Table X (a) of Appendix,	1
Substitution of Table X (b) of Appendix for Table X (a),	liv
Deaths from Cerebral and Spinal Disease,	ib.
Relative liability of the Sexes to Cerebral and Spinal Disease,	lvi
Rise in number of Deaths from Cerebral and Spinal Disease in Years 1890-94,	ib.
Rise in Death-rate in 1890-94 not confined to Cerebral and Spinal Disease,	ib.
Effects of Epidemic of Influenza,	lviii
General Paralysis,	lix
General Debility and Old Age,	lxi
Consumption,	lxii
Diseases of Respiratory Organs other than Consumption,	ib.

	PAGE
IX.—ASYLUM ACCOMMODATION FOR PRIVATE LUNATICS,	lxii
X.—EXPENDITURE FOR PAUPER LUNATICS.	
Increase of Expenditure,	lxiv
Fall of Expenditure per head,	lxv
Summary of Facts as to Increase of Expenditure and Fall in Cost per head,	lxvii
Cost of Land and Buildings only slightly represented in the Expenditure Table,	ib.
Repayments by Relatives,	lxviii
Contributions from State Funds,	ib.
Daily Cost of Maintenance in Establishments,	ib.
Daily Cost of each Mode of Provision for Pauper Lunatics,	ib.
Rates of Board in Establishments,	lxix
Expenditure in connection with District Asylums :—	
Cost of Providing District Asylum Accommodation,	lxx
Cost of Maintenance of Patients in District Asylums,	ib.
Expenditure on Maintenance of Patients in District Asylums during past eleven years,	lxxi
Quantities and Values of Articles consumed in District Asylums,	lxxii
Quantities and Values of Articles supplied by Farms and Gardens of District Asylums,	ib.
Farm and Garden Accounts of District Asylums,	ib.
XI.—DANGEROUS LUNATICS,	ib.
XII.—ALIEN LUNATICS,	lxxiii
XIII.—LUNATICS UNDER JUDICIAL FACTORS,	ib.
XIV.—THE STATISTICS OF LUNACY FROM 1858 TO 1895.	
Increase of Number since 1858,	lxxiv
Difference between the Mode of Distribution at 1st January 1858 and at 1st January 1895,	ib.
Proportion of Lunatics to Population,	lxxv
Death of Dr Robert Lawson,	ib.

APPENDICES.

	PAGE
CONTENTS OF APPENDICES,	lxxvii
APPENDIX A.—Statistical Tables,	1
APPENDIX B.—Entries made by the Visiting Commissioners in the Patients' Books of Asylums and Poorhouses in 1895,	51
APPENDIX C.—General Reports on Visitation of Patients in Private Dwellings :—	
By Dr Sutherland,	120
By Dr Macpherson,	133
By Dr Take,	135
APPENDIX D.—Instructions for the guidance of Inspectors of the Poor in the disposal and management of Pauper Lunatics,	138
APPENDIX E.—Circular issued to Superintendents of Asylums regarding the record of Restraint and Seclusion, and calling for Quarterly Return,	156
APPENDIX F.—Circular Letter to Inspectors of Poor restricting the growth of number of Patients in Private Dwellings in certain parishes in Fifeshire,	157

of

THIRTY-EIGHTH ANNUAL REPORT.

TO THE RIGHT HONOURABLE
LORD BALFOUR OF BURLEIGH,

Her Majesty's Secretary for Scotland.

GENERAL BOARD OF LUNACY,
EDINBURGH, 1st February 1896.

MY LORD,

We have the honour to lay before you our Thirty-eighth Annual Report on the Condition and Management of Lunatics and Lunatic Asylums in Scotland.

The vacancy in our membership caused by the death of Mr Guthrie Smith, to which reference was made in our last Report, has been filled up by the appointment, on 25th July 1895, of Mr John Cheyne, Advocate, Sheriff of Renfrew and Bute.

Departmental
changes—
Appointment
of Sheriff
Cheyne.

Owing to the serious illness of Dr Lawson, Deputy Commissioner, it has been found necessary to obtain the services for temporary periods of Dr Charles Macpherson, Bonar Bridge, and of Dr J. Batty Tuke, junior, Edinburgh, to visit patients in private dwellings, and to report to the Board on their condition.

I. THE NUMBER OF THE INSANE ON 1ST JANUARY 1896.

Number of
Lunatics,
—

The number of the insane in Scotland on 1st January of the present year, exclusive of unreported lunatics maintained in private dwellings from private sources, is shown in the tabular statement on the following page.

Number of
Lunatics on
1st January
1896.

It appears from this statement that of the 14,093 insane persons in Scotland, of whom we had official cognizance at that date, 2202

Number of
the Insane.

Quinquennial
Retrospect not
given in this
Report.

were maintained from private sources, 11,834 by parochial rates, and 57 at the expense of the State.

In our last Annual Report we presented, in accordance with our custom on the completion of a quinquenniad, a detailed retrospect of the changes which had taken place in the numbers and distribution of the insane since the 1st of January 1858. In the present Report, after giving details for the past year, we shall merely indicate the general progress of the Statistics since the establishment of the Board (see page lxxiv). We continue, however, to give, in Appendix A, the complete statistics from 1858 up to the present time.

Statistics of
Lunacy for the
Year 1895.

Changes in the
Number and
Distribution of
the Insane.

II. STATISTICS OF LUNACY FOR THE YEAR 1895.

CHANGES IN THE DISTRIBUTION OF THE INSANE DURING THE YEAR.

With regard to the distribution of the insane in the different classes of establishments and in private dwellings, as shown in the Table on the opposite page, the following differences appear in the manner of distribution of *registered** lunatics at 1st January 1896, when compared with what it was at 1st January 1895.

In Royal and District Asylums there is an increase of 60 private patients and an increase of 276 pauper patients.

In Private Asylums there is a decrease of 8 patients.

In Parochial Asylums there is a decrease of 112 pauper patients.

In Lunatic Wards of Poorhouses there is a decrease of 23 pauper patients.

In Private Dwellings there is a decrease of 2 private patients and an increase of 23 pauper patients.

Tables I., II., and III. (Appendix A) show the number of patients, the manner of their disposal, and their proportion to population and to ordinary pauperism at 1st January 1896, as compared with previous years.

The general results during 1895, as compared with 1894, are, in regard to *registered* lunatics, as follows:—(1) There was a total increase of 214, of whom 50 were private patients, and 164 were pauper patients. (2) Of the total increase of 214, the increased number in establishments was 193, and in private dwellings 21. (3) Of the increased number of 193 in establishments, 52 were private patients and 141 were pauper patients. As the average annual increase in the number of private patients in establishments in the five years 1891–95 was 49, and of pauper patients 206, the increase in the number of private patients in establishments during the last year has been slightly above, and of pauper patients somewhat below, the average annual increase of the preceding quinquenniad. (4) All pauper lunatics in establishments continue to be provided for in institutions of a public character.

* The inmates of Training Schools for Imbeciles and of the Lunatic Department of the General Prison are recorded in separate books, and, not being on the Board's General Register of Lunatics, are not included in this statement.

Number of Lunatics at 1st January 1896.

MODE OF DISTRIBUTION.	Male.	Female.	Total.	PRIVATE.			PAUPER.		
				M.	F.	T.	M.	F.	T.
In Royal and District Asylums,	3907	4323	8230	853	938	1791	3117	3385	6502
„ Private Asylums,	57	87	144	57	87	144	...	...	...
„ Parochial Asylums, <i>i.e.</i> , Lunatic Wards of Poorhouses with unrestricted Licences,	750	864	1614	...	...	...	750	864	1614
„ Lunatic Wards of Poorhouses with restricted Licences,	415	426	841	...	...	...	415	426	841
„ Private Dwellings,	1137	1674	2811	37	74	111	1100	1600	2700
„ Lunatic Department of General Prison,	6329	7374	13703	947	1099	2046	5382	6275	11657
„ Training Schools,	40	17	57	...	...	...	...	...	...
„ Training Schools,	220	113	333	101	55	156	119	58	177
TOTALS,	6589	7504	14093	1048	1154	2202	5501	6333	11834

Statistics of
Lunacy for the
year 1895.Number of
Lunatics at
1st January
1896.

Statistics of Lunacy for the year 1895.

In the number of non-registered lunatics the following changes occurred during 1895:—

Changes in the Number and Distribution of the Insane.

In the Lunatic Department of the General Prison there was an increase of 3.

In Training Schools for Imbecile Children there was an increase of 14 private inmates, and an increase of 10 pauper inmates.

CHANGES FROM THE PAUPER TO THE PRIVATE CLASS, AND *vice versa*.

Changes from Pauper to Private Class and *vice versa*.

It must be kept in view, in connection with the statistical Tables giving the number of lunatics classified into private and pauper patients, that each patient does not necessarily continue till his discharge in the class to which he belonged on being placed on the Board's register. The results shown depend partly on the number of persons who, while continuing on the Board's register, cease to be private patients and become paupers, and *vice versa*. The following tabular statement shows the average number of pauper patients who have become private patients, and of private patients who have become pauper patients, for the quinquennials 1885-89 and 1890-94, and the number for the year 1895:—

YEARS.		Number of Registered Patients transferred from Pauper to Private Class.	Number of Registered Patients transferred from Private to Pauper Class.
1885-89 } 1890-94 }	Average Numbers, {	23 22	42 41
1895,		27	46

Number placed on and removed from Register.

TOTAL NUMBERS PLACED ON AND REMOVED FROM THE REGISTER.

Table IV. (Appendix A) shows the total number of private and pauper lunatics on the register at 1st January of each year from 1874 to 1896, the number placed on the register during each year from 1874 to 1895, and the number removed therefrom each year by discharge or death. It further shows, for each year, the excess of the number placed on the register over the number removed from the register, and the proportion of deaths per cent. on the average number on the register.

It will be observed that the average excess of the number placed on the register over the number removed from the register is 298 for the quinquenniad 1890-94, and that the excess of admissions to the register over removals from it, was 214 in 1895, being 84 below the average for the preceding quinquenniad.

Table V. (Appendix A) shows for each year from 1874 to 1895 the total number of private and pauper lunatics registered during the year, who had never previously been registered as lunatics, and the proportion of such lunatics per 100,000 of population.

PATIENTS IN ESTABLISHMENTS.

Statistics of
Lunacy for the
year 1895.Patients in
Establish-
ments.

Tables VI., VII., and VIII. (Appendix A) give statistics relating to establishments for each year since 1858. Under the term Establishments, as used in this Report, we include Royal, District, Private, and Parochial Asylums, Lunatic Wards of Poorhouses, Training Schools for Imbecile Children, and the Lunatic Department of the General Prison. But it is necessary to point out that the tables in the Appendix take no account of figures referring either to the Training Schools or to the General Prison, except where this is specially stated.

Table VI. shows the numbers resident and the whole movement of the population in all the establishments to which the Table refers for each year, distinguishing between private and pauper lunatics and between males and females; that is to say, it gives the number of patients resident at the beginning of each year, the number admitted during the year, the number discharged, the number transferred from one establishment to another, and the number of deaths.

a. ADMISSIONS TO ESTABLISHMENTS.

Admissions to
Establish-
ments.(1) Direct
Admissions.(1) *Admissions directly under a Sheriff's Order, the Sanction of the Board, or a Certificate of Emergency.*

In arriving at the number of persons admitted to establishments who thereby add to the gross number of asylum patients, the number of admissions which refer to a mere transfer from one establishment to another must be deducted. In Table VII. the number of admissions for each year is therefore given after deducting transfers; and it discloses the facts (1) that the number of private patients admitted during last year was 515, being the same as in the preceding year, and 19 less than the average for the quinquenniad 1890-94; and (2) that the number of pauper patients admitted was 2534, being 127 less than the number during the preceding year, and 106 more than the average for the quinquenniad 1890-94.

(2) *Admission by Transfer.*(2) Admissions
by Transfer.

It will be seen from Table VI. that the number of patients transferred from one establishment to another during 1895 was 753, which is 295 above the number transferred during the preceding year, and 359 above the average for the five years 1890-94. The number of pauper patients transferred was, as it always is, much larger in proportion to the total admissions than the number of private patients transferred. This is due to the fact that private patients are usually placed at once in the asylums in which it is intended they should stay during their whole term of asylum residence; while pauper patients are frequently placed, in the first instance, in the asylums of the Districts in which they are resident, and are afterwards removed to the asylums of the Districts to

Statistics of Lunacy for the year 1895.

(2) Admissions by Transfer.

which they belong. A circumstance which has greatly affected the numbers transferred during the past year is that many pauper patients, through want of accommodation in their own Districts, were boarded temporarily in asylums elsewhere, from which they were transferred to their proper asylums on the provision of fresh accommodation. The following tabular statement shows the transfers which occurred. They were authorised in 36 instances by Sheriffs, and 684 by the Board.

Removed from	To Royal and District Asylums.				To Private Asylums.				To Parochial Asylums.		To Lunatic Wards of Poor-houses.		Total Transfers.	
	Private.		Pauper.		Private.		Pauper.		Pauper.		Pauper.		Private.	Pauper.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Royal and District Asylums,	10	11	193	152	1	1	...	...	20	19	42	42	23	468
Private Asylums, . . .	7	2	...	...	...	1	...	...	...	...	...	...	10	...
Parochial Asylums, . . .	...	...	106	96	...	...	...	...	7	8	3	2	...	222
Lunatic Wards of Poor-houses, . . . . .	...	...	13	16	...	...	...	...	1	...	...	...	...	30
TOTALS, . . .	17	13	312	264	1	2	...	...	28	27	45	44	33	720

(3) Admission of Voluntary Patients to Establishments.

(3) Admission of Voluntary Patients.

Voluntary patients are persons who, with the sanction of the Board, voluntarily enter asylums for treatment of mental disorder, but whose mental condition is not such as to render it legal to grant certificates of insanity in their case. They cannot be detained for more than three days after giving notice of their intention or desire to leave. They are not registered as lunatics, but a record is made of their names and other particulars regarding them. The whole number of such persons admitted into asylums in 1895 was 87. The average number admitted for the ten years 1886-95 was 72. The number resident at 1st January 1896 was 81.

We have for many years been able to state that nothing has occurred to indicate any difficulty or disadvantage traceable to the presence of this class of patients in asylums; and we continue to be of opinion that it is a useful provision of the law which permits persons who desire to place themselves under care in an asylum to do so in a way which is not attended with troublesome or disagreeable formalities. At the visits of the Medical Commissioners to asylums all voluntary inmates are seen, and they have then an opportunity of making statements in regard to their position, should they desire to make any. Where there is reason to suppose that they in any way fail to understand the conditions of their residence, we consider it proper to explain these conditions.

b. DISCHARGES FROM ESTABLISHMENTS.

Discharges from Establishments.

The remark we made, when speaking of the admissions to establishments, in regard to the necessity for the exclusion of

such admissions as were merely transfers from one establishment to another, is applicable also to the discharges from establishments. The general statistics of the discharges for each year, after deducting transfers, are given in Table VIII. (Appendix A). Statistics of Lunacy for the year 1895.

(1) *Discharges of the Recovered.*

There were 203 private patients discharged recovered during 1895, which is 6 above the number for the preceding year, and 7 below the average for the five years 1890-94. The number of pauper patients discharged recovered was 1164, which is 34 above the number for the preceding year, and 92 above the average for the five years 1890-94. Table IX. (Appendix A) shows the proportion of recoveries per cent. of the numbers admitted into each class of establishment. The following tabular statement shows these percentages for the year 1895, and the corresponding average percentages for the quinquennials 1885-89 and 1890-94 :—

Discharges from Establishments of Persons Recovered.

CLASSES OF ESTABLISHMENTS.	Recoveries per cent. of Admissions.		
	1885-1889.	1890-1894.	1895.
In Royal and District Asylums,	39	39	35
„ Private Asylums,	34	38	26
„ Parochial Asylums,	42	43	46
„ Lunatic Wards of Poorhouses,	6	7	6

It will be observed that in this statement private and pauper patients are not distinguished from one another. Regard would require to be had to this fact, and also to the nature of the cases received into each class of establishment, and even into each individual establishment, before these percentages could be accurately appreciated. Very erroneous inferences might be drawn from the figures if due weight were not given to these and other circumstances which have been discussed in previous Reports.

(2) *Discharges of the Unrecovered.*

Discharges from Establishment of Persons Unrecovered.

The number of private patients discharged unrecovered, excluding transfers, during 1895, was, as shown in Table VIII. (Appendix A), 131, which is 2 below the average of the five years 1890-94. The number of pauper patients discharged unrecovered was 419, being 24 below the average for the five years 1890-94.

The following tabular statement shows the different modes in

Statistics of
Lunacy for the
year 1895.

which the discharge of unrecovered patients took place during the year 1895:—

Discharges
from
Establishments
of Patients
Unrecovered.

MODUS OF DISCHARGE.	Number of Patients removed Unrecovered from Asylums during 1895.			
	Private.	Pauper.		Total.
		Re- mained Pauper Lunatics.	Removed from Poor Roll.	
By Friends,	112	...	...	112
„ Minute of Parochial Board, . . .	...	151	148	299
„ Escape,	1	...	16	17
„ Expiry of period of Liberation on Probation,	13	37	9	59
„ Expiry of Emergency Certificate, . .	...	...	7	7
„ Expiry of Provisional Order under sec. 15 of 25 & 26 Vict. c. 54, . . .	...	...	4	4
„ Warrant of Sheriff, and sent to England, Ireland, or other Countries, .	...	...	41	41
„ Warrant of Sheriff under sec. 92 of 20 and 21 Vict. c. 71, . . . . .	...	...	...	...
„ Warrant of Sheriff under sec. 19 of 29 and 30 Vict. c. 51, . . . . .	...	...	...	...
„ Order of Court, in order to undergo Trial, Withdrawal of Sheriff's Order, . . .	...	...	...	...
„ Being placed in Perth Prison as a Queen's Pleasure Lunatic,	1	...	...	1
„ Transference to Training Schools for Imbecile Children, . . . . .	...	...	...	...
„ Authority of Medical Officer under sec. 17 of 25 & 26 Vict. c. 54, . . .	...	...	...	...
„ Expiry of warrant granted under sec. 6 of 34 & 35 Vict. c. 55,	8	...	6	9
„ Defective admission papers,	1	...	...	1
Totals,	131	188	231	550

Deaths in
Establish-
ments.

c. DEATHS IN ESTABLISHMENTS.

The number of private patients who died in establishments during 1895 was 125, which is 19 more than in 1894, and 8 less than the average of the five years 1890–94. The number of pauper patients who died was 814, which is 102 more than in 1894, and 95 above the average of the five years 1890–94.

The following statement, derived from Table VIII. of Appendix A, shows the death-rate for private and pauper patients in establishments per cent. of the average number resident for the quinquennials 1885–89 and 1890–94, and for the year 1895:—

CLASSES OF PATIENTS.	Proportion of Deaths per cent. on Num- ber Resident in all Establishments.		
	1885–89.	1890–94.	1895.
Private Patients,	6·6	7·6	6·5
Pauper Patients,	8·1	8·7	9·2
Both Classes,	7·7	8·5	8·7

The rate of mortality per cent. of the number resident in different classes of establishments for the quinquennials 1885-89 and 1890-94, and for the year 1895, is shown in the following statement:—

Statistics of
Lunacy for the
year 1895.
—
Deaths in
Establish-
ments.

CLASSES OF ESTABLISHMENTS.	Proportion of Deaths per cent. on Number Resident.		
	1885-89.	1890-94.	1895.
Royal and District Asylums, . . .	7·8	8·8	8·4
Private Asylums,	8·0	6·3	10·8
Parochial Asylums,	8·9	9·6	10·8
Lunatic Wards of Poorhouses, . . .	5·5	4·6	5·7

Table X.^(a) (Appendix A) gives the average annual mortality and the average percentage of deaths from various causes in Royal and District Asylums for the thirty-eight years, 1858-95.

This Table will be discontinued after this year. The statistics contained in it are examined further on, forming the subject of a special discussion along with those of the following Table, which will in future take its place.

Table X.^(b) (Appendix A) gives for each sex the number of deaths, and the number of deaths from various specified causes, in all establishments, for each year from 1870 to 1895, together with the absolute annual average number of deaths from each cause, and the average percentage of deaths from each cause, during each period of five years. The results of an examination of the figures of this Table and of those of the preceding Table will be found on pages l to lxii of this Report.

Table XXII. of Appendix A shows the number of deaths, from the various causes specified, in each establishment during the past year.

d. REMOVALS FROM ESTABLISHMENTS ON STATUTORY PROBATION.

Removals
on Probation.

At 1st January 1895, 110 patients were absent from asylums on probation, with the sanction of the Board. Of these, 39 have been finally discharged as recovered, 18 were sent back, 51 remained on the expiry of the period under the care of friends, and 2 died. In the course of 1895, 138 patients were discharged on probation. Of these, 21 have been finally discharged as recovered; 9 whose period of probation has expired remain under the care of friends; 33 have been returned to asylums, and 75 were still on probation at the close of the year.

The total number of probationary removals, since their authorisation in 1862 to the close of 1895, has been 4148, namely:—

In 1862 and 1863,	109	In 1868,	137
„ 1864, . . .	73	„ 1869, . . .	149
„ 1865, . . .	103	„ 1870, . . .	148
„ 1866, . . .	102	„ 1871, . . .	185
„ 1867, . . .	112	„ 1872, . . .	181

Statistics of
Lunacy for the
year 1895.

Removals
on Probation.

In 1873, . . .	145
„ 1874, . . .	118
„ 1875, . . .	123
„ 1876, . . .	120
„ 1877, . . .	105
„ 1878, . . .	101
„ 1879, . . .	113
„ 1880, . . .	87
„ 1881, . . .	77
„ 1882, . . .	192
„ 1883, . . .	167
„ 1884, . . .	112

In 1885, . . .	122
„ 1886, . . .	101
„ 1887, . . .	124
„ 1888, . . .	127
„ 1889, . . .	116
„ 1890, . . .	105
„ 1891, . . .	137
„ 1892, . . .	106
„ 1893, . . .	141
„ 1894, . . .	172
„ 1895, . . .	138

Of the 4148 patients liberated on probation since 1862, 852 were replaced, before the expiry of the period of probation, in the asylums from which they had been removed.

The numbers liberated on probation from the different establishments in 1895 are shown in the following statements:—

Aberdeen Royal Asylum, . . .	15	Barony Parochial Asylum, . . .	0
Argyll District Asylum, . . .	3	Glasgow Parochial Asylum, . . .	0
Ayr District Asylum, . . .	23	Govan Parochial Asylum, . . .	0
Banff District Asylum, . . .	1	Greenock Parochial Asylum, . . .	0
Crichton Royal Institution, . . .	10	Paisley Parochial Asylum, Riccarton-bar, . . .	1
Dundee Royal Asylum, . . .	0	Paisley Parochial Asylum, Craw Road, . . .	1
Edinburgh Royal Asylum, . . .	12	Aberdeen East Poorhouse, . . .	0
Elgin District Asylum, . . .	0	Aberdeen West Poorhouse, . . .	0
Fife District Asylum, . . .	1	Buchan Poorhouse, . . .	0
Glasgow Royal Asylum, . . .	1	Cuninghame Poorhouse, . . .	0
Govan District Asylum, . . .	0	Dumbarton Poorhouse, . . .	0
Haddington District Asylum, . . .	1	Dundee East Poorhouse, . . .	0
Inverness District Asylum, . . .	27	Dundee West Poorhouse, . . .	0
Kirklands Asylum, . . .	1	Edinburgh Poorhouse, . . .	0
Lanark District Asylum, . . .	0	Hamilton Poorhouse, . . .	1
Midlothian District Asylum, . . .	8	Inveresk Poorhouse, . . .	0
Montrose Royal Asylum, . . .	3	Kincardine Poorhouse, . . .	0
Murray's Royal Asylum, . . .	0	Linlithgow Poorhouse, . . .	0
Perth District Asylum, . . .	1	Old Monkland Poorhouse, . . .	0
Roxburgh District Asylum, . . .	16	Perth Poorhouse, . . .	0
Stirling District Asylum, . . .	8	Wigtown Poorhouse, . . .	1
Mavisbank Private Asylum, . . .	2		
Mollendo House Private Asylum, . . .	1		
Saughtonhall Private Asylum, . . .	0		
Westernmains Private Asylum, . . .	0		
Whitehouse Private Asylum, . . .	0		
		Total, . . .	138

In the numbers above given, patients liberated on trial for periods not exceeding twenty-eight days are not included. Such trials can be made without the sanction of the Board, and they are frequently made use of by some Superintendents. The statutory removal on probation is not granted by the Board for a period exceeding one year, and its special use is to permit of the conditional liberation of patients whose fitness for permanent discharge cannot be determined without trial for a longer period than twenty-eight days. It is frequently found that patients, who appear while in the asylum to have improved so much that they are fit for being provided for in private dwellings, become unsettled when the restraints of the asylum are removed. It is not, how-

ever, justifiable to retain permanently in the asylum all patients in whose cases a possibility of such unsettlement is thought to exist. The large majority of patients liberated on probation undergo no deterioration, and many are benefited by the change. By liberating patients on probation there is an opportunity given for testing their fitness for permanent discharge, and they can be replaced in the asylum without the expense attending a Sheriff's order, if they prove unfit for permanent discharge. We continue to be of opinion that in some establishments a more frequent use of the probationary discharge would probably lead to a larger number of permanent discharges than takes place at present.

Statistics of
Lunacy for the
year 1895.
Removals
on Probation.

It must not, however, be inferred from the figures given above, that the number of liberations on probation from any particular asylum is an indication of the frequency with which trial is made in it of the fitness of unrecovered patients for residence in private dwellings. In some asylums from which few or no discharges on statutory probation take place, the removal of unrecovered patients is freely resorted to either by severing their connection with the asylum at once or after the trial of twenty-eight days, which, as already explained, may take place by permission of the Superintendent, and without the authority of the Board.

III. ESTABLISHMENTS FOR LUNATICS.

THE ESTABLISHMENTS IN WHICH LUNATICS ARE ACCOMMODATED.

Establishments
for Lunatics.

Distribution
of Lunatics
in Establish-
ments.

Table XV. (Appendix A) shows the number of private and pauper lunatics in each Royal, District, Private, and Parochial Asylum and Licensed Poorhouse on 1st January 1896, and also the number of pauper lunatics from each county in each Royal, District, and Parochial Asylum and Licensed Poorhouse. It shows that, with very few exceptions, the pauper lunatics of Scotland are disposed of either in asylums erected for them by the Districts or Parishes to which they belong, or in asylums with which the District Boards have made contracts.

SHERIFFS' ORDERS.

Orders granted
by Sheriffs
during the
Year.

Table XIX. (Appendix A) gives the statutory return exhibiting the number of orders granted by Sheriffs for the admission of lunatics into any Public, Private, District or Parochial Asylum or House, stating the Asylum or House to which such order referred, during the year ending 31st December 1895. The number of orders granted during the year was 3017.

LICENCES GRANTED BY THE BOARD FOR ESTABLISHMENTS.

Licences
granted by the
Board to
Asylums and
Lunatic Wards
of Poorhouses.

Table XX. (Appendix A) gives the statutory return exhibiting the number of licences granted by us for the continuance or

Establishments
for Lunatics.

establishment of charitable institutions, private asylums, and lunatic wards of poorhouses, and the transfer of any licence from one establishment to another, during the year ending 31st December 1895. The number of licences amounted to 28, and they were granted for the renewal of the licences of 2 charitable institutions, 5 private asylums, and 21 wards or portions of poorhouses set apart for lunatics.

RESULTS OF TREATMENT IN ESTABLISHMENTS.

Results of
Treatment in
Establish-
ments.

In the several sections of Table XXI. (Appendix A) we give the average number resident, the number admitted, and the results of treatment for each establishment. We have already alluded to the general results which these tables exhibit when commenting on Table IX.

Causes of
Death in
each Establish-
ment

Table XXII. (Appendix A) gives a classification of the causes of death of those patients who died in establishments during the year 1895, giving each class of establishment and each establishment separately.

Changes among
Attendants
and Servants.

CHANGES AMONG ATTENDANTS AND SERVANTS.

The whole number of attendants and servants who left, were dismissed, or died, during 1895, was 620, which is 97 more than the number for the previous year, and 72 more than the average of the last ten years. The number who resigned their situations voluntarily is 517, which is 120 more than the number for the previous year, and 107 more than the average for the past 10 years. We continue to regard it as unfavourable to the interests of the patients that these changes should be numerous; and it is deserving of careful consideration by the administrators of these institutions where changes occur very frequently, whether some addition to wages or some increase of comforts is not desirable. In addition to these 517 voluntary resignations, 12 men and 19 women left on account of ill health, 1 woman died during her term of service. The remainder were returned to us as dismissed for the following reasons :—(a) For drunkenness, 11 men and 1 woman; (b) for insubordination, 6 men and 4 women; (c) for being absent without leave, 3 men and 8 women; (d) for incompetence or unsuitableness, 6 men and 7 women; (e) for neglect of duty, 2 men and 1 woman; (f) for ill-treatment of patients, or on account of complaints of patients, 6 men and 3 women; (g) for improprieties of conduct, 3 women; (h) for dishonesty, 1 man. Two men and 7 women absconded.

Escapes from
Asylums.

ESCAPES FROM ASYLUMS.

The whole number of escapes during 1895 was 196. Of these 107 were brought back within twenty-four hours, 52 within a week, and 15 after a week; 22 were not brought back during the currency of the Sheriff's order or the certificate of emergency, on the authority of which they had been detained. Of the 22

patients not brought back, 17 were removed from the asylum registers as relieved, 4 as not improved, and 1 died. Establishments for Lunatics.

The following statement shows the number of escapes that have taken place during each of the ten years from 1886 to 1895:— Escapes from Asylums.

Years.	Number of Escapes.	Not brought Back.		Number of Escapes per 1000 of Patients in Establishments.
		Removed from Register as Unrecovered.	Removed from Register as Recovered.	
1886,	228	16	2	26
1887,	221	15	3	25
1888,	207	17	4	23
1889,	190	22	1	20
1890,	182	19	4	19
1891,	194	22	7	20
1892,	176	15	1	18
1893,	201	26	4	20
1894,	236	17	4	18
1895,	196	21	...	18
Totals,	2031	190	30	

It appears from this statement that the number of escapes during 1895 was below the average proportion for the last ten years. The number of cases in which the escaped patient was not brought back within a week was 15. Very few of the patients, not brought back before the expiry of the twenty-eight days during which the law permits of their being received into the asylum without new certificates and new Sheriff's order, are permanently lost sight of. Many are ultimately replaced in asylums; and it is of importance to know that some remain at large from being found to have ceased to need asylum care.

ACCIDENTS IN ASYLUMS.

Accidents in Asylums.

The whole number of accidents reported to us as having taken place during the year 1895 was 82. Of these 10 ended fatally.

In the case of 6 of these patients, the death was, in some cases undoubtedly, and in others very probably, due to suicidal intention. Two of these deaths were caused by cut-throat, 1 (a voluntary boarder) by swallowing a large dose of morphia, 1 by inhalation of coal gas, which had been obtained by tearing off the architrave of a door, 1 by swallowing yew leaves and other matter, and 1 by the sudden jumping into a river of a patient under an attendant's charge. Of the remaining 4 fatal accidents, 2 were due to impaction of food in the air-passages during meals, 1 to asphyxia during an epileptic fit, and 1 to an accident on the railway. There were 8 cases of serious injury from attempted suicide.

In 34 cases the accidents involved fracture of bones or dislocation of joints. These were occasioned in 27 cases by falls, in 5 cases by struggling with fellow patients or attendants, or by

Establishment
for Lunatics.

Accidents in
Asylums.

assaults of fellow patients, and in 2 cases the cause could not be determined with certainty. Of the remaining accidents, there were 15 injuries to the head. Of these, 5 were caused by falls, 6 by assaults of fellow patients, and 4 were self-inflicted,—2 intentionally and 2 unintentionally. There were reported, in addition, 14 cases of an unimportant character.

In every case of death by accident, of sudden or unexpected death, or death under circumstances of apparent or alleged suspicion, occurring in an asylum, the Superintendent is required to give immediate intimation not only to the Board, but also to the Procurator-Fiscal of the county in which the asylum is situated, who makes such inquiry as he may deem necessary.

Progressive
History of
Patients first
admitted in
1868.

PROGRESSIVE HISTORY OF PATIENTS FIRST ADMITTED INTO ESTABLISHMENTS IN THE YEAR 1868.

The following tabular statement is the twenty-eighth of a second series of such tables:—

YEAR.	New Cases Admitted.	Progressive History of Patients first admitted into Asylums in 1868.							
		Re-admitted during Year.				Removed Recovered.	Removed Unrecovered.	Died.	Remaining at 31st December of each year.
		Once.	Twice.	Thrice.	Total Number of Re-ad- missions.				
1868	1319	38	...	...	38	305	97	107	848
1869	...	73	5	...	83	209	70	94	558
1870	...	40	...	...	40	51	23	60	464
1871	...	36	3	...	42	38	25	48	395
1872	...	35	2	...	39	26	13	28	367
1873	...	24	1	...	26	23	15	25	330
1874	...	19	2	...	23	15	11	13	314
1875	...	19	1	...	21	16	9	13	297
1876	...	17	1	...	19	13	4	9	290
1877	...	19	...	...	19	10	6	13	280
1878	...	19	1	...	21	10	8	14	269
1879	...	13	...	...	13	15	1	11	255
1880	...	17	...	...	17	8	8	11	245
1881	...	13	1	...	15	11	4	12	233
1882	...	16	...	...	16	9	6	4	230
1883	...	13	...	...	13	9	5	10	219
1884	...	7	1	...	9	7	3	10	208
1885	...	10	...	...	10	4	9	6	199
1886	...	11	...	...	11	7	7	8	188
1887	...	11	...	...	11	1	8	12	178
1888	...	10	...	...	10	12	1	5	170
1889	...	8	1	...	10	4	8	6	162
1890	...	4	1	...	6	7	4	7	150
1891	...	4	1	...	6	1	4	6	145
1892	...	3	...	...	3	2	3	10	133
1893	...	7	...	...	7	5	2	5	128
1894	...	3	2	...	7	4	2	9	120
1895	...	5	...	...	5	1	1	8	115

In this table we continue to trace the history of those patients who were admitted into the asylums of Scotland in 1868, and who

had not previously been inmates of Scotch Asylums, unless they were so before 1st January 1858, when our registers were instituted. Establishment
for Lunatics.

From this table several important deductions can be drawn. With regard to the recoveries, it appears that the 1319 patients who were admitted in 1868 yielded 514 recoveries, or 39 per cent., during the first two years, and during the succeeding twenty-six years only 309 recoveries, or 23 per cent. If both the 1319 original admissions, and also the re-admissions during the entire twenty-eight years, are taken as the basis of calculation, the recoveries during the first two years would represent 36 per cent., and those of the succeeding twenty-six years would represent 18 per cent. If, however, only the number 558 remaining in asylums at the end of the first two years and the re-admissions since that time be taken as a basis, we find that during the twenty-six years since the year 1869 the recoveries represent 32 per cent. It is to be kept in mind, as we have been accustomed to point out in drawing inferences from the table, that one patient may figure more than once as recovered, and it must not be concluded, therefore, that 823 persons out of the 1319 patients admitted were discharged recovered, nor, of course, that those who were discharged recovered were all permanently restored to sanity. Indeed, it has been ascertained that a large number of the re-admissions are drawn from among the recovered patients. If the whole of the re-admissions came from this source, the proportion of the 1319 that could be regarded as permanently recovered would be very largely reduced. A certain number of the re-admissions are, however, drawn from among the patients discharged unrecovered; and a considerable number of the readmissions refer to a comparatively small number of patients who have been discharged and re-admitted several times. Of the 5 persons re-admitted during 1895, to which the 5 re-admissions refer, 2 have been re-admitted once since 1868, 1 twice, 1 three times, and 1 six times. The patient discharged as recovered in 1895 had been re-admitted six times since 1868, the last admission being in 1895. The data furnished by the number of deaths can be relied on for more precise inferences. It may safely be concluded from them that the annual death-rate among patients who have been less than four years inmates of asylums is from about 12 to 25 per cent. of the number resident, and that among those who have been more than four years and less than twenty-eight years inmates of asylums, the annual death-rate is only an average of 5 per cent. of the number resident. This difference is of importance, as showing the necessity, when considering the death-rate of any asylum, of taking into account the average length of residence of the inmates. It is worthy of note that during the last eighteen of the twenty-eight years the re-admissions have been pretty steadily balanced by the discharges of recovered and unrecovered patients taken together, and that the reduction in the number resident is almost wholly accounted for by the deaths.

Progressive
History of
Patients first
admitted in
1868.

Present Con-
dition of Estab-
lishments.

IV. PRESENT CONDITION OF ESTABLISHMENTS FOR THE INSANE.

Different
Classes of
Establish-
ments.

Establishments for the insane in Scotland arrange themselves in the followings groups :—(a) Royal and District Asylums, (b) Private Asylums, (c) Parochial Asylums, (d) Lunatic Wards of Poorhouses, (e) Training Schools for Imbecile Children, and (f) the Department for Criminal or State Patients in the General Prison.

The Royal or Chartered Asylums are institutions which were in existence previous to the enactment of the Lunacy Act of 1857. They are 7 in number. Five of these—the Royal Asylums of Aberdeen, Dundee, Edinburgh, Glasgow, and Montrose—were at their origin erected out of funds derived from legacies, subscriptions, and donations, including in all cases contributions of greater or less amount from parochial sources. The other two institutions, the Crichton Royal Institution at Dumfries, and Murray's Royal Asylum at Perth, were erected out of funds provided by the benefactors whose names they bear. All the 7 Royal Asylums received both pauper and private patients at the time of the passing of the Act of 1857; but the Directors of Murray's Royal Asylum resolved, soon after the passing of that Act, to devote the institution to the care and treatment of private patients only, and a like resolution has been come to by the Directors of the Glasgow Royal Asylum.

District Asylums are institutions created under the provisions of the Lunacy Act of 1857. Asylums of this class are provided out of funds furnished by county and burgh assessments, and are intended for the accommodation of the pauper lunatics of localities where such accommodation is not otherwise provided. At present there are 14 such asylums in occupation and 1 in course of erection.

Private Asylums are establishments conducted by their proprietors for profit; and only private patients are received into them. There are 5 such establishments at present.

Parochial Asylums are establishments erected out of funds furnished by the poor-rate of the parishes to which they belong. These establishments are called Parochial Asylums for convenience, but they are technically lunatic wards of poorhouses which have been licensed by the Board to receive pauper patients suffering from all forms of insanity, that is, those who are curable and dangerous as well as those who are regarded as incurable and harmless. There are 6 establishments of this class at present. They will soon be reduced in number, and no more can be created.

The name of Lunatic Wards of Poorhouses is given specially to portions of poorhouses which have been set apart for the accommodation of pauper lunatics who are regarded as incurable and not dangerous. Such sections exist at present in 15 poorhouses.

The National Institution for the Training of Imbecile Children at Larbert, and the Baldovan Asylum for Imbecile Children, are both charitable institutions erected by voluntary subscription. In addition to children received gratuitously, both, however, receive private and pauper inmates whose board is paid respectively by their friends and their parishes.

The lunatic department of the General Prison at Perth provides accommodation for insane prisoners and convicts, and also for persons detained during Her Majesty's pleasure, who have either been acquitted on account of insanity of the offences with which they had been charged, or have been found to be insane in bar of trial.

Present Con-
dition of Estab-
lishments.

The Reports by the Commissioners of their inspection of the different establishments are given in Appendix B. These Reports are entered in the books of the respective establishments on the occasion of the statutory visits of the Medical Commissioners to the several institutions, and they form the basis of the following remarks :—

(a) ROYAL AND DISTRICT ASYLUMS.

Royal and Dis-
trict Asylums.

The new hospital buildings of the Aberdeen Royal Asylum are reported to be approaching completion, and they promise to provide accommodation of a high character for patients requiring hospital care and treatment. The overcrowding of the main building continues to increase, but considerable relief will be obtained when the hospital block is opened. The accommodation for private patients at Elmhill is reported to be excellent, and the patients resident there are provided for in a liberal manner. The charitable function performed by the asylum in receiving private patients in straitened circumstances at low rates of board merits warm commendation. No patients belonging to the county of Aberdeen for whom a rate of £30 a year can be paid is refused admission. Structural improvements are in progress at the Daviot branch of the asylum, which will add considerably to its efficiency. They consist of a new day-room for the male patients, new kitchen and stores, and new lavatory and bathroom accommodation. The water supply at this branch is reported to be now abundant, and of good quality. The management of the institution is said to be marked by great ability, and the treatment of the patients is kindly and judicious.

Aberdeen
Royal Asylum
at Aberdeen.

An addition to the Argyll and Bute District Asylum, which will provide a much needed improvement in the hospital accommodation on the male side, is expected to be ready for occupation during the present year. It is understood that the District Board contemplate obtaining at the earliest opportunity additional land, as the present amount possessed by the asylum is too small to keep the patients regularly employed in healthy and active outdoor work. All parts of the asylum were found in excellent order, scrupulously clean, and comfortably heated. The patients are reported to be skilfully treated, and to have their wants adequately supplied. They were free from excitement, and everything seen during the visits showed able and conscientious management.

Argyll and
Bute District
Asylum, Loch-
gilphead.

The recent additions to the Ayr District Asylum were found in occupation, and they are reported to provide satisfactory accommodation for the patients. These additions have been comfortably and liberally furnished, and tastefully painted and decorated. The small

Ayr District
Asylum, Glen-
gall, Ayr.

Present Con-
dition of Estab-
lishments.

Royal and Dis-
trict Asylums.

separate building, intended for use in case of infectious disease, is at present occupied by a group of easily managed female patients. The relief from overcrowding which has resulted from the occupation of the new buildings is reported to have had a marked and gratifying effect on the condition of the patients. It is, however, pointed out that these extensions barely provide for the present number in the asylum, and that overcrowding, which was recently a source of much disquietude and danger, will recur at an early date, unless further accommodation is provided. The rate of increase in the asylum population during recent years has been remarkably rapid, and the District Board are recommended to take prompt action to provide for the growth in numbers which appears to be inevitable. Efforts have been and are being made to board out those patients who no longer require asylum care and treatment, but it is not expected that these removals will obviate the necessity for further extensions. The patients are reported to be well cared for, and the asylum was found in excellent order.

Banff District
Asylum,
Ladysbridge.

At the time of one of the visits to the Banff District Asylum four female patients were found suffering from typhoid fever. The cause of the fever was believed to be an open sewage drain near the section of the asylum at Woodpark, in which these patients resided, and those responsible for this drain were called upon to lay a pipe to convey the sewage into the drainage of the district. It is recommended that the furniture of the day-rooms be improved by the addition of sofas and easy chairs for the use of aged and feeble patients. The asylum is said to be managed in an able and energetic manner, and the patients are reported to be well cared for and kindly treated.

Crichton Royal
Institution,
Dumfries.

The reports on the Crichton Royal Institution show that it continues to be managed with marked ability, and to be in a highly prosperous condition. The way in which the patients are treated is said to be successful in obtaining improvement of their mental condition, and in promoting their comfort and physical well-being. The separate villas and mansion-houses attracted attention by the way in which the patients resident in them obtain the advantages of comfortable homes, free from asylum arrangements, while they remain under skilled medical supervision, and under the care of trained attendants. An addition has recently been made to the resources of the establishment by the purchase of Friar's Carse, which formerly belonged to Mr Crichton, the founder of the institution. This mansion will afford accommodation for the highest class of patients, who can benefit by residing in a house surrounded by extensive grounds and charming scenery. The number of pauper lunatics in the institution has considerably decreased by the removal of boarders from Lanarkshire to the Lanark District Asylum. Extensions and improvements of an important character have been resolved upon by the Directors. In addition to the existing first and second houses, it is understood that they have in view the erection of a third house to accommodate about 200 pauper patients, and that it is to be largely of the character of a hospital for the acute and sick. A new laundry block is to be

built to accommodate forty chronic and useful female pauper patients, and the farm buildings are to be made capable of receiving eighty useful male pauper patients. These extensions will provide for 300 pauper lunatics in all, a provision which, it is hoped, will suffice to meet the wants of the Dumfries Lunacy District.

Present Condition of Establishments.

Royal and District Asylums.

An improvement is reported to have been effected in the Dundee Royal Asylum in the provision made for sick female patients. The laundry block was formerly used for this purpose, but attention has been repeatedly drawn to its unsuitability in many ways. These patients are now provided for in a large well-lighted day-room dormitory in the south-east of the main building, and this rearrangement is reported to provide suitable and efficient accommodation of a hospitable character for female patients. Two additions are being built, one on the male and one on the female side, to provide dormitories for the special supervision of the suicidal, epileptic, and paralytic. The mansion of Gray House was found in occupation, and the accommodation in this mansion is reported to be excellent, devoid of special asylum features, and admirably suited for patients paying the higher rates of board. Attention is drawn to the smallness of the night-attendant staff, and it is recommended that at least one additional night attendant for each side should be engaged. The Directors are asked to consider the desirability of erecting a suitable chapel in the grounds, as divine service has at present to be conducted in one of the day-rooms, which is quite inadequate for the number of patients who could attend. It is again recommended that a second medical assistant be appointed. The asylum is reported to have been found in good order, and the clothing of the male patients, which formerly attracted unfavourable attention, was found to be more satisfactory.

Dundee Royal Asylum, Liff, Dundee.

The completion and occupation of Craig House constitutes an important event in the history of the Royal Edinburgh Asylum during 1895. This building is reported to be imposing and attractive externally, and admirably arranged internally, as an asylum for the upper and middle classes. All the accommodation is of great excellence, and nothing has been left undone to secure the comfort, safety, and well-being of the patients. To the west of Craig House are the hospital for gentlemen and a villa called Queen's Craig, and to the east is the hospital for ladies. In connection with these buildings are South Craig Villa, Bevan House, and Old Craig House, the whole group constituting an asylum of the highest excellence for patients belonging to the wealthy classes. It is remarked that the possession of these and other separate buildings, numbering ten in all, affords an efficient means of classifying the patients according to their social condition, and it also affords facilities for conferring benefits and privileges upon them suitable to their mental state. The management of the institution, and the medical and general care of the patients, are reported to be characterised by great ability and success. The food, clothing, exercise, occupation, and recreation of the patients receive every attention, and the nursing of the sick and infirm in the various hospital sections is reported to be of a high standard of efficiency.

Royal Edinburgh Asylum, Edinburgh.

Present Con-
dition of Estab-
lishments.

Royal and Dis-
trict Asylums.

Elgin District
Asylum, Elgin.

The patients in the Elgin District Asylum were found in a very satisfactory condition. They are reported to be kindly treated, and their medical and other requirements to be well attended to. The asylum was found clean, and in good order. The extension for forty female patients is reported to be ready for occupation, and relief of the overcrowding on the female side will therefore soon be obtained. A large day-room in the female division is recommended to be converted into a dayroom-dormitory for the accommodation of the sick and infirm who are at present scattered through the dormitories upstairs, where they are not under efficient supervision. A night attendant has been appointed for the female side, and it is recommended that one be engaged for the male division. Attention is called to the absence of any arrangement for heating the single rooms.

Fife and Kin-
ross District
Asylum,
Springfield,
Cupar.

The new hospital buildings of the Fife and Kinross District Asylum are reported to be approaching completion, and three dormitories and eleven single rooms are being utilised for the accommodation of patients. The necessity for relieving the overcrowded condition of the main buildings is said to be great, and it is therefore urgent that no effort should be spared to get the hospital ready for complete occupation. The best method of obtaining an additional supply of water is under the consideration of the District Board. The patients are reported to be neatly and comfortably clothed, and their physical condition is said to indicate a suitable and liberal dietary. The industrial employment of the inmates is well attended to, and the management of the asylum carried on with energy and ability.

Glasgow Royal
Asylum, Gart-
navel, Glasgow.

The valuable service which the Glasgow Royal Asylum renders to the public in providing for patients of limited means is commended, and it is reported that this charitable function of the institution is being extended by the Directors more and more every year. The number of patients whose rate of board is £40 *per annum* and under has increased from 93 in 1884 to 185 in 1895, and many of them are kept at rates which are merely nominal. The institution evidently enjoys the confidence of the medical profession and of the public, for not only is the poorer class of patients increasing in number, but also those paying the higher rates of board. The asylum was found in admirable order, and it is reported to be comfortably and handsomely furnished. Everything that was observed during the visits tended to show that each case receives careful consideration, and that the treatment of the patients is skilful and kindly. It is noted with satisfaction that the staff of attendants includes nine who are on duty during the night, as it is of the greatest importance that the number of attendants on night-duty should be adequate.

Haddington
District
Asylum, Had-
dington.

Attention is drawn to the rapid increase in the number of patients in the Haddington District Asylum, and to the necessity of providing additional accommodation, in order to meet the requirements of the District. It is pointed out that the sick-rooms are inadequate for the number of infirm and helpless patients,

and it is recommended that extension of these sections of the asylum should form part of the scheme of providing increased accommodation. A small Cottage Hospital is also recommended, which, when not required for patients labouring under infectious disease, could be used in some other way. The patients are reported to be very well provided for in regard to food and clothing, and to be treated judiciously and with kindness. The asylum was found in good order, and the appearance of the wards is bright and comfortable.

Present Con-
dition of Estab-
lishments.

Royal and Dis-
trict Asylums.

The inadequacy of the hospital accommodation in the Inverness District Asylum is referred to in both entries. Plans for extended and improved hospital sections have been submitted by the District Board and approved of by us. Plans have also been approved of by the Board for new bath-rooms and store-rooms, and for a new entrance hall on the north side of the asylum. These alterations and improvements will, it is said, greatly increase the efficiency of the asylum, and make it more in accordance with modern requirements. The condition of the patients was found very satisfactory, and their clothing is specially commended. The day-rooms and dormitories were scrupulously clean and in good order, and several improvements were observed in the arrangements for the comfort and well-being of the patients. The management of the asylum is said to be carried on with great ability and success.

Inverness
District
Asylum,
Inverness.

The Kirklands Asylum continues to act as a joint asylum for the Lunacy Districts of Lanark, Govan, and City of Glasgow. The branch establishment at Lingo has ceased to be connected with it, having been taken over by the Lanark District Board. The condition of the asylum was found very satisfactory, and the patients are well cared for. The orderly manner in which the meals are served, and good behaviour of the patients in the dining-hall, are favourably commented on. The small extent of land possessed by the asylum provides only a small number of the male patients with healthy out-door work.

Kirklands
Asylum,
Bothwell.

The Lanark District Asylum at Hartwood was opened for the reception of patients on the 14th May 1895. It is constructed to contain 500 patients, but the administrative and central blocks are sufficient to meet the requirements of the asylum when it is enlarged to contain 700 patients. The buildings are of a substantial character, and stand on an elevated site, having a southern exposure. A complete description is given of the various sections of the asylum. Each section has been designed to accommodate a special class of patients, and the division of the institution into blocks is said to possess many advantages, and to facilitate administration. The asylum, as a whole, is reported to be admirably suited for its purpose. The arrangements for heating and ventilation are most satisfactory. The electric light is used for illuminating purposes, and there is telephonic communication throughout the whole institution. The furnishing of the asylum is reported to have been

Lanark
District
Asylum,
Hartwood.

Present Con-
dition of Estab-
lishments.

Royal and Dis-
trict Asylums.

admirably done, and in a way best fitted to secure the efficient treatment and care of the patients. The staff of the day attendants is at present one to nine patients, and the arrangements for the supervision of the patients during the night are thoroughly efficient. The orderly and rapid manner in which the meals are served attracted special attention, and many of the arrangements were observed tending to give a feeling of homelike sociability to the meals. The clothing of the patients is tasteful and well-fitting, and so attended to as to give, even the most slovenly and demented, as smart an appearance as possible. The asylum estate has an area of 601 acres, which not only provides a good and abundant supply of water for the institution, but also affords ample means for the employment of the patients in healthy out-door work. The industrial occupation of the inmates is energetically attended to. The reports show that the administration of the asylum has been organised in a rapid and efficient manner, and that the management is being conducted with marked ability.

Midlothian and
Peebles Dis-
trict Asylum,
Rosewell, near
Edinburgh.

The reports on the Mid-Lothian and Peebles District Asylum continue to show that the management is characterised by conscientiousness and ability. The day-rooms and dormitories were found in excellent order, and the recent painting and decorations have added to their brightness and cheerfulness. The patients are reported to be well provided for. Their medical treatment is conducted with skill, and each case is carefully studied. The fact that sixty-seven per cent. of the inmates are industrially employed is recorded with satisfaction. The appointment of an Assistant Medical Officer is referred to with approval.

Montrose
Royal
Asylum,
Montrose.

The building of the branch for private patients at the Montrose Royal Asylum is reported to be progressing rapidly. The reports on the institution show that there has been no increase in the number of pauper patients during the year, and consequently the overcrowding of the pauper section has not become intensified. Relief will be obtained for this section when the new branch is completed. All sections of the asylum were found in excellent order, and the efficiency of the arrangements of the hospital for the care and treatment of the sick and infirm is commented on. The patients of all classes are reported to be well provided for, and the management of the asylum, both general and medical, is highly satisfactory. Two waiting-rooms are about to be built, which are to be divided into apartments separated by dwarf partitions, for the purpose of affording privacy during the interviews between the patients and their relatives or friends. Commendation is expressed of the important service which the institution renders to the counties of Forfar and Kincardine by receiving patients in straitened circumstances who are unable to pay from private sources a higher rate of board than £25 a year. It is pointed out that unless such persons are received as private patients at this rate they would either have to forego asylum care and treatment, or their relatives would have to apply to the parochial authorities, and these patients would then have the stigma of pauperism attached to them.

and The patients in Murray's Royal Asylum were found admirably provided ~~to~~^{for} 6, and they are said to be free from complaint, and to be dealt with skilfully and with kindness. Great ability was evident in the management of the institution. The industrial occupation of the patients receives much attention, and the efforts to engage them in useful and healthy work are attended with marked success. The several parts of the asylum were found in excellent order, and great taste is said to be displayed in the furnishing and decoration of its various sections.

Present Con-
dition of Estab-
lishments.

Royal and Dis-
trict Asylums.

Murray's
Royal Asylum,
Perth.

The female convalescent house, one of the two blocks of buildings at Perth District Asylum which are intended to relieve the over-crowded condition of the main institution, is reported to be completed, and to be admirable in construction and in its arrangements. The accommodation in this building is said to be more characteristic of a private dwelling than of a public institution, and the furnishing, which has been excellently done, is home-like. The erection of the corresponding building for men is being rapidly pushed forward. Structural changes, by which the wings of the main building are to be converted into hospital sections, are reported to have been begun. Two cottages for married attendants have been built, and others are about to be erected. Thirty-four acres of land have recently been bought, which will provide means of disposing of the asylum sewage by irrigation. This land is a valuable addition to the resources of the institution, as it has increased the opportunities of employing the male patients in healthy out-door work. The electric light has been introduced into the asylum, and as it is safer, cooler, and cleaner than gas, its introduction is recognised as a great benefit. The asylum is reported to be in excellent order, and scrupulously clean, and improvements have been effected in furniture and furnishings. Great attention is given to the clothing of the patients, so as to promote self-respect and contentment, and to lessen the feeling that they are in an asylum. The general and medical care and treatment of the patients are highly commended, and great energy and ability are said to be displayed in the management of the institution.

Perth District
Asylum,
Murthly.

The overcrowding of the female division of the Roxburgh District Asylum will be removed on completion of the plans which have been prepared for the erection of a hospital block for female patients. Great care has been taken in the preparation of these plans, and it is expected that when this hospital is erected it will be found to be efficiently equipped, and admirably suited for its purpose. It is understood that steps are being taken towards obtaining an additional supply of water to the asylum, and it is hoped that before long the institution will have a good and abundant water supply. The District Board are endeavouring to secure about 23 acres of land adjoining the asylum grounds, and a hope is expressed that their efforts will be successful, as the present extent of land in the possession of the asylum is far too small to provide sufficient out-door work for the male patients. The asylum was found in good order, and shows evidence everywhere of being managed with marked ability and conscientiousness.

Roxburgh
District
Asylum,
Melrose.

Present Con-
dition of Estab-
lishments.

Royal and Dis-
trict Asylums.

Stirling Dis-
trict Asylum,
Larbert.

Attention is drawn to the overcrowded condition of the Stirling District Asylum, and to the necessity of commencing without delay the erection of the new buildings on which the District Board have resolved, and which have been approved of by the Board. These buildings consist practically of a duplication of the present succursal block, with a dining-hall between the old and new blocks. The condition of the dormitories in the main building is reported to compare unfavourably with the rest of the asylum, and it is recommended that they should be improved and renovated. The drainage of the asylum is about to be connected with the drainage of the Larbert district. The advantages which more land would confer on the patients are pointed out, and the District Board are recommended to lose no opportunity of acquiring additional land. The absence of any religious service for the Roman Catholic patients is referred to, and it is suggested that arrangements should be made for such service. The highly satisfactory condition of the hospital section is referred to, and the care and treatment of the patients in all sections of the asylum are said to indicate administrative ability of a high order.

Private
Asylums.

Mavisbank
Private
Asylum,
Polton.

(b) PRIVATE ASYLUMS.

Mavisbank Asylum is reported to have been found in excellent order and comfortably and tastefully furnished. Lady nurses have been substituted for ordinary attendants, a change which is expected to be of great benefit to the patients, and to conduce to their happiness and contentment. An Assistant Medical Officer has been appointed. This addition to the staff is stated to be one which meets with cordial approval, as it obviates the necessity of placing a medical man, who is a stranger to the patients, in charge of the asylum during the absence of the Medical Superintendent. Extensive renovation and repairs in the plumbing and sanitary arrangements of the asylum are about to be effected. The management is conducted with ability and success.

Mollendo
House Private
Asylum,
Musselburgh.

The patients in Mollendo House Private Asylum are reported to be treated with kindness and consideration, and the establishment was found clean and in good order.

Saughton Hall
Private
Asylum near
Edinburgh.

The patients in Saughton Hall Private Asylum are reported to be provided for in a very liberal manner, and their medical and general treatment is characterised by high professional ability. The two sections of the asylum, Saughton Hall and Balgreen, have all the features of well-appointed residences for persons in affluent circumstances, and the two establishments are as free as possible from arrangements suggestive of an asylum. The management of the asylum continues to be admirable.

Westermains
Private
Asylum,
Kirkintilloch,
Dumbarton-
shire.

Westermains Private Asylum is reported to have been found in excellent order, scrupulously clean, and comfortably furnished, and a favourable impression was produced as to the liberal way in which the patients are treated.

The patients in Whitehouse Private Asylum are reported to be treated with kindness and liberality, and the establishment was found in excellent order, comfortably heated, and tastefully furnished.

Present Condition of Establishments.

Whitehouse Private Asylum, Inveresk, Midlothian. Parochial Asylums.

(c) PAROCHIAL ASYLUMS.

The additions and alterations which have been in progress at the Barony Parochial Asylum during the last four years are reported to have been completed. These have not only increased the accommodation so as to make it ample for the wants of the parish, but have improved its character in many directions. It is pointed out that these improvements furnish a means of obtaining a more efficient classification of the patients than has hitherto been practicable, and it is recommended that in allocating the accommodation to its several purposes as much should be given to the hospital sections as possible. The necessity for this is the increasingly large proportion of hospital cases which are admitted to the asylum. The extension of the dining and amusement halls, and the improvements in the bath-rooms, lavatories, shoe-rooms, and stores will greatly increase the efficiency of the institution and facilitate its administration. The condition of the patients in all sections of the asylum was found to be satisfactory, and their requirements as to food, clothing, occupation, and open-air exercise are reported to be fully met.

Barony Parochial Asylum, Woodilee, Lenzie, near Glasgow.

The City of Glasgow Parochial Asylum, about to be abolished, is reported to be well managed, notwithstanding the many defects in the position and structure of the building. The wards were found clean and in good order, and the condition of the patients is reported to be satisfactory.

Glasgow City Parochial Asylum, Glasgow.

A desirable relief to the overcrowded condition of the Govan Parochial Asylum is reported to have been effected by the transfer of patients to the new Govan District Asylum at Hawkhead. The wards were found very clean and in good order, and the patients were free from excitement and irritability. This is attributed to the careful manner in which they are engaged in healthy industrial occupation. The management of the asylum is said to be conducted with ability and conscientiousness.

Govan Parochial Asylum, Glasgow.

The attention of the Committee of the Greenock Parochial Asylum was directed to the unsatisfactory nature of the fence between the asylum grounds and the railway, and steps are being taken by the Committee to have the defect remedied. All sections of the asylum were found in excellent order, and the painting and decoration which have recently been done have added to the brightness and cheerfulness of the wards. The patients were found well provided for in regard to food and clothing, and their general health is satisfactory. The management of the asylum, both from a general and medical point of view, is said to be efficient.

Greenock Parochial Asylum, Greenock.

Present Con-
dition of Estab-
lishments.

Parochial
Asylums.

Paisley
Parochial
Asylum,
Riccartsbar,
Paisley.

New lavatories and water-closets are reported to be in process of construction at the Paisley Parochial Asylum, Riccartsbar. It is recommended that the male hospital should be transferred to the females, and the female hospital to the males, on the ground that the transference would be a desirable improvement in the arrangements of the asylum. The feeding and clothing of the patients are commended, and the condition of the wards is reported to be very satisfactory.

Paisley
Parochial
Asylum,
Craw Road,
Paisley.

The state of the day-rooms and dormitories, and the condition of the patients of the Paisley Parochial Asylum at Craw Road, are reported to have been found very satisfactory. The clothing of the inmates is specially commended on account of its quality, neatness, and tidiness. Attention is called to the fact that there are no arrangements for night attendance, except by laying the duty on officials who are fully occupied during the daytime. It is pointed out that, if the asylum is to continue to receive recent and acute cases, a night attendant should be appointed for the male side and one also for the female side.

Lunatic Wards
of Poorhouses.

(d) LUNATIC WARDS OF POORHOUSES.

Aberdeen East
(St Nicholas)
Poorhouse,
Aberdeen.

The condition of the patients in the Lunatic Wards of Aberdeen East Poorhouse is reported as indicative of an ample and suitable dietary. The clothing of the patients is reported as neat and tidy in appearance, and sufficient in quantity. The new bath-room, which is admirable in its arrangements, will render the bathing of the patients comfortable and efficient.

Buchan Poor-
house, New
Maud, Aber-
deenshire.

The wards in the Buchan Poorhouse were found in excellent order, clean, well-aired, and suitably heated. The patients are treated with care and consideration, and their clothing attracted attention on account of its quality and tidiness.

Cunninghame
Poorhouse,
Irvine,
Ayrshire.

The Lunatic Wards of Cunninghame Poorhouse are reported to be clean, well aired, and comfortably heated. The patients are judiciously treated, and are not subjected to irksome discipline. Their industrial employment is well attended to. The unsuitability of several patients for care in these wards is pointed out, and their removal to the asylum is recommended.

Dumbarton
Poorhouse,
Dumbarton.

The Lunatic Wards of the Dumbarton Poorhouse are reported to be managed with ability and energy. The patients are well provided for, and a large amount of useful and profitable work continues to be done in the institution. The wards have been made brighter by being repainted and redecorated.

The day-rooms and dormitories of the Lunatic Wards of Dundee East Poorhouse are reported to have been found in good order, clean, well-aired, and comfortably heated. The general appearance of the patients was indicative of efficient care, and of a liberal dietary. The reflooring of the main corridors with pitch pine was found in progress. The bathrooms in the wards are small and unsatisfactory, and it is recommended that larger bathrooms should be provided and that two baths should be placed in each.

Present Con-
dition of Estab-
lishments.

—
Lunatic Wards
of Poorhouses.

—
Dundee East
Poorhouse.

The patients in the Lunatic Wards of the Dundee West Poorhouse are reported to have been found in a satisfactory condition as to cleanliness and clothing, and their physical condition is said to indicate a suitable and liberal dietary. The industrial occupation of the inmates receives much attention. It is recommended that a shelter be erected in the female airing court, similar to the one on the male side.

Dundee West
Poorhouse.

The day-rooms and dormitories in the Lunatic Wards of the Edinburgh City Poorhouse are reported to have been found in good order. The patients, in so far as they were suitable for the wards, were found satisfactorily provided for; but attention is called to the presence of unsuitable patients, and their removal to the asylum is called for.

Edinburgh
City
Poorhouse.

The inmates of the Lunatic Wards of Hamilton Poorhouse are reported to be well provided for, and judiciously treated. The wards were found in excellent order. The lavatory on the male side has been refitted, and made more complete.

Hamilton
Poorhouse,
Hamilton.

The wards of Inveresk Poorhouse are reported to be well managed. They were found in excellent order, and are comfortably furnished. The tranquillity and contentment which the patients showed indicated kind and liberal treatment, and their industrial occupation is well attended to.

Inveresk
Poorhouse.

The enlargement of the day-rooms in the Lunatic Wards of Kincardine Poorhouse is again recommended in the interests of the patients. The inmates are reported to be comfortably clothed, adequately fed, and in every way well treated.

Kincardine
Poorhouse.

The condition of the patients in the Lunatic Wards of Linlithgow Poorhouse is reported to be satisfactory, and their treatment is characterised as kindly and judicious. The wards were found clean and in excellent order. The water-closets and bath-rooms on the male side are to be reconstructed and rearranged.

Linlithgow
Poorhouse,
Linlithgow.

The Lunatic Wards of Aberdeen West Poorhouse were found clean, in good order, and comfortably heated. The patients made no complaint, but certain recommendations are made with a view to increasing their comfort.

Lunatic
Wards, West
Poorhouse
(Old Machar),
Aberdeen.

Present Condition of Establishments.

Lunatic Wards of Poorhouses.

Old Monkland Poorhouse, Coatbridge.

Perth Poorhouse, Perth.

The patients in the Lunatic Wards of Old Monkland Poorhouse are reported to be well provided for, and to be contented and free from excitement. The wards were clean, well aired, and comfortably furnished.

The Lunatic Wards of the Perth Poorhouse are reported to have been found in excellent order, and to have a comfortable and well furnished appearance. The patients are well cared for and judiciously managed, and it is stated that they are kept engaged in useful occupations. Their clothing is favourably commented on.

Wigtown Poorhouse, Stranraer.

Among the improvements recommended in the Lunatic Wards of Wigtown Poorhouse are the providing of easy or arm chairs for aged and infirm inmates, the repair of the stair leading to the male wards on account of its worn and unsafe condition, and the substitution of a water-closet for a urinal, which is in a very unsatisfactory condition. The physical health, cleanliness, and clothing of the patients are, it is stated, satisfactory, and their industrial employment is reported to receive due attention.

Training Schools for Imbecile Children.

Baldovan Institution, near Dundee.

(e) TRAINING SCHOOLS FOR IMBECILE CHILDREN.

The reports on the condition of the Baldovan Institution show that it continues to be managed by Miss Butler, under the medical direction of Dr Greig, in a most creditable manner. The children are reported to be treated with much care and kindness, and to be trained in school and in industrial employment in a way which is efficient and successful. Every department of the institution was found in excellent order and scrupulously clean. Satisfactory progress is being made with the new buildings, and it is stated that these additions will add greatly to the efficiency of the institution, both in facilitating the work of education and adding to the comfort of the children.

Larbert National Institution.

Structural improvements of an important character are in progress at the Larbert Institution. A separate house is being built for the Superintendent. The interior of the front block of the main building, which formerly gave accommodation to the Superintendent's family and to private pupils, is being rearranged and improved, in order to provide more suitable accommodation for pupils who pay a high rate of board. These alterations promise to be of a very satisfactory character. Attention is again drawn to the want of a large hall in which the children, many of whom are in delicate health, can play or be drilled during wet weather and through the winter months, and a hope is expressed that the Directors will soon see their way to provide it. The institution continues to be managed with great efficiency, and to fulfil its purpose in a way which reflects credit on the Directors, and on Mr Skene and his staff. The scholastic and industrial training which the children receive is reported to have a beneficial effect on their mental condition and bodily vigour. The clothing of the children is strongly commended for its taste-

ful and pleasing appearance, and the orderly way in which the children take their food and behave in the dining-hall is stated to be very gratifying. The condition of the institution is reported to be one of perfect cleanliness and admirable order.

Present Con-
dition of Estab-
lishments.

(f) *Establishment for State and Criminal Lunatics.*

Establishment
for State and
Criminal
Lunatics.

The Lunatic Department of H.M. General Prison at Perth is maintained by the State for the confinement of those persons called criminal lunatics who are or who have been insane and who are still regarded as requiring detention in a prison.

Lunatic De-
partment of
H.M. General
Prison at Perth.

During 1895, 13 patients were admitted to this establishment. The offences of which they were accused or were guilty, the places from which they were brought, and other facts regarding them, are shown in the following statement:—

H.M. General Prison, Perth—Admissions to Lunatic Department during 1895.

c/No.	Whence brought.	Date of Trial.	Initials of Names.	Date of Admission.	Offence of which Accused or Convicted.
17/1434	Main Prison, . . .	24 Dec. 1894	D. H.	11 Jan. 1895	(1) Theft by opening lock-fast places; (2) house-breaking with intent to steal.
1459	Glasgow Prison, . . .	28 Jan. 1895	J. M'K or M'K.	1 Feb. "	Assault by discharging loaded firearms, and prev. con. of assault.
733	Recommitted, . . .	26 Apr. 1861	M. M'K. M'G. or T.	4 Mar. "	Murder.
1515	Glasgow Prison, . . .	26 Feb. 1895	J. K.	4 " "	Murder.
585	Main Do. . . .	23 Oct. 1893	J. M'K. or A.	11 " "	Theft and prev. con. of theft, and of falsehood, fraud, and wilful imposition.
761	Glasgow Do. . . .	8 Feb. 1895	R. G.	26 " "	Malicious mischief and prev. con.
762	Dundee Do. . . .	26 Mar. 1895	E. B. or B.	26 " "	Causing the death of her child by neglect.
18/134	Main Do. . . .	15 June 1893	J. F.	23 May "	Assault and robbery and prev. con. of theft.
380	Peterhead Do. . . .	2 July 1891	P. G.	12 July "	Rape.
480	Edinburgh Do. . . .	16 Oct. 1894	P. B.	8 Aug. "	Desertion and loss of kit.
755	Maxwelltown Prison, . . .	20 Aug. 1895	J. J. R.	9 Oct. "	Assault (2 charges).
922	Glasgow Do. . . .	5 Nov. 1895	W. M'Q.	8 Nov. "	Murder.
923	Do. Do. . . .	11 'ct. 1895	A. C.	8 " "	Breach of peace and prev. con.

The subjoined figures show the changes among the inmates of the Department in 1895:—

Average Number of Inmates.		Admissions.		Discharges Recovered.		Discharges not Recovered.		Deaths.	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
39.0	16.5	9	4	—	—	6	3	1	0

Establishment
for State and
Criminal
Lunatics.

The inmates at 31st December 1895 were classified as follows:—

1. Found to be insane in bar of trial, and detained during Her Majesty's pleasure,	33
2. Found to have been insane at time of committing offence, and detained during Her Majesty's pleasure,	17
3. Sentenced to death, but respited, or sentence commuted on account of insanity,	2
4. Convicts whose sentences had expired,	—
5. Imprisonment prisoners whose sentences had expired,	—
6. Convicts whose sentences had not expired,	4
7. Imprisonment prisoners whose sentences had not expired,	1
	<hr/> 57

Present Condi-
tion of the
Establishment.

Every section of the Department is reported to have been found in good order, and the management is stated to be characterised by ability and success. The majority of the inmates are employed in useful and healthy work.

V. LUNATICS IN PRIVATE DWELLINGS.

Lunatics in
Private
Dwellings.

All Pauper
Lunatics but
not all Private
Lunatics in
Private Dwell-
ings are under
jurisdiction of
Board.

It will be useful to repeat here the brief statement which has been given in previous Reports, describing the position occupied by patients in private dwellings in Scotland, and the amount of official supervision which they receive.

All private patients, if they are detained in establishments for the insane, come under the supervision of the Board, and all pauper patients, whether provided for in establishments or in private dwellings, are intimated to the Board, placed on the register, and brought under supervision.

But in the case of private patients in private dwellings,—that is, insane persons who are not paupers, and who are not placed in establishments for the insane,—it is not required by the statutes that all of them should be under the supervision of the Board. The circumstances which bring under the Board's supervision an insane person who is not a pauper and who is not placed in an establishment, are the following:—

1. If he is kept in a private dwelling for profit, unless he is a patient in regard to whom it is certified by a registered medical practitioner that he is afflicted with a malady which is not confirmed, and that it is expedient to place him for a temporary residence, not exceeding six months, in the house in which he is so kept.

2. If, whether kept for profit or not, he has been insane for more than a year, and is subjected to compulsory confinement to the house, to restraint or coercion, or to harsh and cruel treatment.

3. If he possesses property which has been placed under curatory by a Court of Law.

A large number of private patients living in family, who are neither kept for profit nor restrained nor cruelly used, are thus not under our jurisdiction.

Lunatics in
Private
Dwellings.

We do not regard it as desirable that any class of persons should be brought under official supervision unless such supervision appears to be necessary to guard against abuse; but the systematic visitation of those patients in private dwellings over whom the statute requires us to exercise supervision is regarded as of great importance.

The number of private lunatics who were provided for in private dwellings, with the sanction of the Board, on the 1st of January 1896, was 111. Of these, 41 were persons whose means have been placed under curatory by the Court of Session or by a Sheriff Court. Of the whole number of private patients in private dwellings, 35 were in houses which possessed special licences for the reception of not more than four patients, and 76 were in houses in each of which there was only one patient, and which do not therefore require to be licensed.

Private
Lunatics in
Private
Dwellings.

The position of the Board towards the non-pauper insane in private dwellings is very different from its position towards the pauper insane in private dwellings. Of the non-paupers, none come upon the register unless they are kept for gain, or are possessed of property administered by judicial factors. The great majority of the non-pauper insane in private dwellings thus do not come on the register. The Board have no official knowledge of them, and they live at home under the care of their natural guardians.

On the other hand, every pauper lunatic, wherever placed, comes upon the register; and the Board are fully informed as to the mode in which he is provided for. The supervision of every individual member of the pauper class of the insane by the central administration is peculiar to Scotland. In no other country is every lunatic whose maintenance is contributed to from public sources under the direct supervision of the central authority. The patients provided for with the sanction of the Board in private dwellings on 1st January 1896 was 2700. Of these 1009 are boarded with guardians who are relatives, and 1691 with unrelated guardians. Of the pauper patients with unrelated guardians, about two-thirds are in private dwellings specially licensed to receive 2, 3, or 4 patients. The remainder, as well as almost all patients with related guardians, are accommodated singly in houses which, having only one patient, require no special license.

Pauper
Lunatics in
Private
Dwellings.

The number of pauper lunatics in private dwellings increased during the year 1895 from 2677 to 2700, an increase of 23. The number admitted during the year to the roll of pauper patients in private dwellings was 317. Of these 130 were resident in private dwellings when reported to the Board, and remained, with their sanction, under private care, and 187 were removed from asylums. Of the total number of patients in private dwellings, 23 were certified sane during the year, 17 were removed from the poor-roll by their friends, 101 were removed to asylums, and 153 died—the death-rate being equal to 57 per 1000.

We present as usual in the Appendix (Appendix C) the general reports on the visitation of patients in private dwellings. For more than seventeen years these reports have been made by Drs Fraser and Lawson, but this year neither of these gentlemen have reported, owing, in the case of Dr Fraser to his promotion to the office of Commissioner, and in the case of Dr Lawson to his being incapacitated for work by illness. The reports for the past year are by Dr J. F. Sutherland, Deputy Commissioner, and by Dr C. Macpherson, and Dr J. Batty Tuke, junior, who were successively appointed for periods of three months to perform the duties of

General
Reports on
Visitation of
Patients.

Lunatics in
Private
Dwellings.

General
Reports on
Visitation of
Patients.

Deputy Commissioner in the place of Dr Lawson. These gentlemen being all new to their work could not of course regard what they found during their inspections from the point of view of officials of long experience, but their reports have a special interest as showing the impression which the present condition of patients in private dwellings produced on minds freshly applied to the work of inspection.

It is satisfactory, therefore, to find that the impressions recorded in the reports for the past year indicate that the patients are, on the whole, well provided for. Dr Sutherland says in regard to the pauper patients:—‘I had not long entered upon my duties before I became satisfied that with relatively few exceptions the patients were in all respects most suitably provided for in regard to accommodation, environments, guardianship, food, clothing, and supervision, and at the close of the year, after an inspection of ~~about 1000 dwellings, and 1347~~ patients, the views at first impressed on my mind in regard to this method of disposing of 23 per cent. of the insane in Scotland were deepened and confirmed.’

Dr Macpherson reports on the pauper patients under two heads, (1) those living with relatives, and who are as a rule in the homes where they have been all their lives, and (2) those who are boarded with unrelated guardians. In regard to those living with relatives he reports favourably, though he is of opinion that the kind of accommodation provided for the patients is not always what is to be desired. ‘In some districts in Scotland,’ he says, ‘the standard of comfort in this respect is low, and in the case of patients living with relatives on whom falls the duty of repairing their own houses, some difficulty is not infrequently met with in having necessary repairs and improvements carried out. But the views of the community in such districts as to what constitutes comfortable dwellings are gradually being raised, and the surroundings of the insane are thus improving from year to year with the general advance in comfort.’ In regard to the patients living with unrelated guardians, the class which constitutes what are strictly speaking the ‘boarded-out’ patients, Dr Macpherson reports in less qualified terms. ‘As regards specially licensed houses, and guardians generally,’ he says, he ‘can only speak in terms of the highest praise and satisfaction. The houses are commodious, well lighted and ventilated, and kept thoroughly clean. Most of them have large gardens which are generally well kept, to a very large extent by the labour of the patients. The guardians treat the patients as well as they do themselves, indeed, in many cases better as far as sleeping accommodation is concerned. They are well fed, and judging by what I saw, and by the records of the local medical officers, in very many cases they have improved greatly in bodily health since exchanging the asylum life for their present one under private guardians.’

Dr J. Batty Tuke, junior, states in his report that, as is usual with the visits of Deputy Commissioners when engaged in the work of inspection, all visits paid by him ‘were essentially of the nature of ‘surprise visits.’ Until I was in the house,’ he continues, ‘no guardian had any idea that I was connected with the General Board of Lunacy. I was therefore enabled to see exactly how the

der private care

pauper

1155

poor

patients lived from day to day, and to judge accordingly. With very few exceptions I found that the pauper lunatics in private dwellings were well provided for in every respect. The standard of bodily health was excellent, dietary and clothing good and sufficient, and the dwelling-houses clean and comfortable. I was convinced that, as far as practicable, the patients were treated as one of the family, and shared everything equally with their guardians.'

Lunatics in
Private
Dwellings.
—
General
Reports on
Visitation of
Patients.

All the reports, besides giving general opinions such as have been quoted above, deal with special questions which have suggested themselves as worthy of notice. Both Dr Sutherland and Dr Macpherson draw attention to the guarantee against neglect or ill-treatment of the patients in private dwellings, afforded by the fact that the doings of the guardians and of the patients are necessarily well-known to their neighbours, and are thus the subject of criticism which is none the less valuable and effective because it is unofficial. 'In addition to official inspection,' says Dr Sutherland, 'the system is open to the inspection of the public, and this unofficial surveillance cannot be over-estimated.' Dr Macpherson, when discussing the condition of patients in districts where pauper lunatics are boarded in numbers sufficient to be spoken of as aggregations, says, 'the most efficient safeguard against improper treatment of patients is undoubtedly the public eye, and I regard it as a distinct advantage that most of these aggregations are in villages or hamlets where there are many residents not directly concerned in the boarding-out system, and where the everyday life of all the inhabitants is seen and freely commented on by the community at large. The patients when well are never confined to the house, but are out in the garden and fields whenever the weather allows. Neighbours in these country villages go in and out of each others' houses with a freedom unknown in more thickly populated districts, and the family life of the guardians is thus thoroughly known. Consequently, one may feel assured that any case of systematic neglect or ill usage would soon come to the knowledge of some official, and the extreme rarity of any complaint is the strongest testimony in favour of the kindness and efficiency of the guardianship generally.'

The Lunacy Amendment Act of 1862 empowered the Board to grant special licenses for the reception of patients not exceeding four in each house. After the passing of this Act licenses for three and four pauper patients were frequently applied for and granted, when the guardianship and accommodation were certified to be suitable; but for at least seventeen years past the Board have, in the first place, granted licenses for two pauper patients only, and have not increased the number to three or four except on the recommendation of the Deputy Commissioners, after the houses have been visited and reported on. At 1st January 1876, fourteen years after the passing of the Act, the total number of special licenses for houses for the reception of pauper patients was 78, and of these 30 were for more than two patients, being 45 per cent. of the total number. At 1st January 1896—twenty years later—the total number of such licenses was 476, and of these 166, or 35 per cent., were for three or four patients. It will thus be seen that, though the

Private
Dwellings
licensed for the
reception of
more than two
Pauper
Patients.

Lunatics in
Private
Dwellings.

Private
Dwellings
licensed for
reception of
more than two
Pauper
Patients.

proportion of houses licensed for more than two patients to the total number of licenses granted has fallen, the actual number of licenses for more than two patients has risen with the great increase in the total number of licenses. The increase of the number of houses licensed for more than two pauper patients has been due chiefly to the action of the larger urban parishes. They cannot possibly find suitable accommodation for their patients in their own parishes, and they are thus obliged to look for it in rural parishes, often situated in other counties. When suitable villages are found, and when guardians of two patients have proved themselves good, and have sufficient accommodation for a larger number, the parochial authorities have naturally thought that three or four patients would be equally well provided for in these houses. It is urged by the Inspectors of Poor that where four patients are kept, and where the keeping of the patients is thus more profitable than where only one or two are kept, the guardian attaches a higher value to the license, and becomes more anxious to perform his duties in a way which will insure his retention of it. They also state that a higher class of guardians can be got to receive a group of four patients than those who are willing to accept a license for only two. These statements of the Inspectors of Poor are not without foundation in fact, and the Board have consequently from time to time consented, on the urgent request of Parish Councils, to increase licenses originally granted for two patients. They have granted these applications, however, reluctantly, and in recognition of the fact that there are considerations against as well as in favour of permitting the residence of more than two patients in one house. The experience which has been gained has tended to show that it is only in exceptional cases that licenses for more than two patients are desirable. The chief object that the Board have had in view in their administration of the system of providing for harmless and incurable pauper lunatics in private dwellings, has been to place the patients as nearly as possible in circumstances similar to those in which they would have been, had they not been overtaken by mental disorder. To attain this end, it is essential that they should share in the family life of their guardians in the same way as the other members of the household. The reluctance of the Board to grant licenses for three or four was due to a fear that the placing of more than two patients together might lead to special arrangements being made for their separate care, and that they would thus be more or less debarred from sharing in the family life. This fear has proved to be not groundless. In some instances it is found that a room is set apart for the patients, in which they are kept very much by themselves during the part of the day that they are indoors, and thus, though they are in other respects well provided for, the full enjoyment of family life is to a large extent lost. The experience of the Board has convinced them that this undesirable result is not so likely to occur when the number of patients in a house does not exceed two, and they have resolved for the future to refuse applications for licenses for more than this number, except in very special circumstances, where they are satisfied that the granting of a license for more than two patients will

not involve the disadvantages that are here described. It must, however, be kept in view that, in the case of many houses licensed for more than two patients, the guardianship, accommodation, and treatment of the patients are excellent, and in some of these cases the guardians have taken larger houses and have made structural changes, on the faith that they would be permitted to continue to receive more than two patients. We do not, therefore, propose to take any drastic measure to reduce the number of licenses for more than two patients without discrimination of the circumstances applicable to each house. We propose rather to refuse in future to grant licenses for more than two patients, except in rare instances, and to take the opportunities which frequently arise, through changes in the guardianship and through the death and removal of patients, to weed out those houses which have proved themselves less suitable for three or four patients, and thus gradually to reduce the number of licenses for more than two.

Lunatics in
Private
Dwellings.
—
Private
Dwellings
licensed for
reception of
more than two
Pauper
Patients.

Another matter which has from time to time engaged the attention of the Board is the tendency to the accumulation of boarded out pauper lunatics in certain localities. There are now several places where there are a good many houses not far removed from one another in which patients are kept, thus constituting what have been called aggregations. Between the years 1860 and 1870 aggregations numbering about 30 patients each had come into existence in the village of Kennoway in Fife, Balfroon in Stirlingshire, and Gartmore in Perthshire, and during recent years aggregations have grown up in other places, the greatest number of these being in the county of Fife. The development of these aggregations has been due to the inhabitants of the villages in which they have sprung up having more accommodation in their houses than they required for themselves, and to their being engaged in occupations in which patients can usually assist. When one or two pauper lunatics happen to be boarded in a locality of this kind, and when it is seen that they are peaceable and helpful members of their households, a desire to have similar boarders naturally arises among some of the neighbours. On the other hand, parochial authorities of urban parishes, having often a difficulty in finding private dwellings and guardians suitable for their patients, welcome the discovery of a locality where such dwellings and guardians are easily found. The localities in which aggregations of pauper lunatics have thus occurred are generally places which have been the seats of industries, such as hand-loom weaving, which have fallen into decay, where the population has been decreasing and the house accommodation is greater than is now required, and where the people maintain themselves to a great extent by the cultivation of small portions of land. The patients are quite as kindly treated and as well housed in these localities as elsewhere, as is indicated in the passage already quoted from Dr Macpherson's Report. But, nevertheless, the conditions of their life do not fulfil in a complete manner the object which the Board have sought to attain in the system of boarding patients in private dwellings. The aim of the Board has been to restore each patient as far as possible to the circumstances

Aggregations
of Pauper
Patients in
certain
localities.

Lunatics in
Private
Dwellings.

Aggregations
of Pauper
Patients in
certain
localities.

of ordinary life, and to the influences of association with persons in normal mental condition. In a village where the insane are so numerous as to form an appreciable element in the population, these influences must be to some extent impaired.

We have for long been aware of the drawbacks attending undue aggregations of patients in villages. This led us in 1877 to prohibit any increase in the number of patients boarded in Kennoway in Fifeshire, and a similar prohibition took place in 1885 with regard to the village of Balfron in Stirlingshire. Like prohibitions have also been in contemplation as regards other villages such as those of Thornton, Auchtermuchty, and Freuchie in Fifeshire, and Gartmore in Perthshire. This subject was specially dealt with in our Thirty-third Report, 1891, in which we say * :—‘Within certain limits there has not been found any valid objection to these aggregations, but as we have frequently stated in our Annual Reports, we do not regard them as beneficial in themselves, and the action of the Board has been devoted not to encouraging their development, but to preventing their undue growth. Wherever an aggregation has shown signs of becoming so large as to make the lunatics form a prominent element in the population of a locality, we have taken steps to arrest the growth of the aggregation, and to induce parochial authorities to find homes for their patients in other localities. It should be kept in view, however’ (we went on to say, speaking of Scotland generally), ‘that the great majority of pauper lunatics who are in private dwellings are not gathered in groups either large or small, but are resident within or in the neighbourhood of the parishes to which they belong.’

One of the greatest objections to aggregations beyond certain limits lies in the fact, that patients come to be regarded as a class apart from the rest of the community, and this distinction is apt not only to be perceived by and to act unfavourably upon the patients themselves, but to create in the guardians a mental attitude which lessens the likelihood of the patients being looked on and treated as ordinary members of the household. The surroundings and conditions of life generally are also in small towns or villages less advantageous to many of the insane than would be the case in purely rural localities. Many patients, it is true, fit completely into the life of such communities, and enjoy residence in them, but others who cannot enter into such a life have, on the whole, less freedom and out-door life than would be possible to them in purely rural localities. It may also be supposed that the unofficial and unpremeditated supervision already referred to as of great value, will be less active, and less exacting, where aggregations exist. In pursuance of the views above expressed, we have resolved to restrict still further the growth of the number of patients in localities in which there seems to be a risk of these unfavourable conditions arising.

Fatal injury to
a child by a
Patient at
Giffordtown,
Fifeshire.

Less than a month prior to the date of this Report a deplorable occurrence happened at Giffordtown, Collessie, Fifeshire. A pauper patient, W. C., boarded there, apparently under the influence of anger at being pressed by the wife of the guardian, to whose care he had

been recently removed, to do a piece of work in the garden, attacked her with a table knife, and on her escaping from him, stabbed her child in the head, inflicting a fatal injury. On the fact being telegraphed to us, the two Medical Commissioners proceeded to Giffordtown and made a full inquiry into the circumstances. The patient had been for nearly five years under private care, and although certain facts were disclosed at the inquiry as to his conduct under a previous guardian, which made his suitability for this mode of care appear doubtful, his two former guardians had not looked upon him as dangerous, and the inquiry did not reveal anything to show that, under judicious guardianship, he was not a man who could be safely cared for in a private dwelling. This was the opinion, up to the time of the occurrence, of the authorities of the parish and of the local medical man, who were immediately responsible for his care. The case is unique in our experience, and considering that it is the solitary incident of the kind during a period of thirty-eight years among an average of about 2000 patients cared for in private dwellings, we see no ground for attaching any special significance to the occurrence. The patient is now in safe custody, and the case is being inquired into and dealt with by the Crown authorities.

Lunatics in
Private
Dwellings,
—
Fatal injury to
a child by a
Patient at
Giffordtown,
Fifehire.

Certain persons in Innerleith, Collessie, shortly before the time of the occurrence above described, had made complaints with regard to the patients boarded in the neighbourhood. The complaints, however, had no special reference to the patient who committed the assault, and we are satisfied that it was by a mere coincidence that the occurrence took place about the time and near the place where the complaints originated. These complaints were of a general nature, and inquiry into their truth was rendered very difficult from the fact that the complainers refused to furnish us with the names of either the patients or guardians to whom the complaints referred. Nevertheless they have been made the subject of the most careful investigation by our officers, without, up to the present time, anything being revealed to show that they are well grounded. They are not concurred in by the inhabitants generally of the locality. We are, however, continuing our efforts to ascertain the names of the patients or guardians who are the subject of the complaints, so as to enable us to satisfy ourselves as to whether there is foundation for the statements made, and to remedy anything which may be found to be wrong.

Complaints
from certain
persons in
Innerleith,
Collessie,
Fifehire.

Fife has for more than thirty years been regarded by the authorities of large urban parishes as a county which offered special facilities for the boarding-out of harmless patients. The Edinburgh City Parish recognised its suitability for this purpose as early as 1862, and the example of that parish was subsequently followed by St Cuthberts, and latterly by the Barony Parish of Glasgow and by Dundee. The village of Kennoway was the first village largely utilised for this purpose, and, as has been already said, we long ago determined to prevent any further growth of the number of patients boarded there. Other villages and hamlets in the county were afterwards found to be equally suitable, and the number of patients boarded in Fifehire has thus gradually increased until

Lunatics in Private Dwellings.

Complaints from certain persons in Innerleith, Collessie, Fifeshire.

there are at the present time about 470 patients in the county who do not belong to the parishes in which they are resident, of whom about 180 are males and 290 are females. Some of these patients, however, belong to parishes in Fifeshire. In 1895, in recognition of the fact that complaints had been made by persons in Collessie, we determined not to sanction any further increase in the number of insane boarders in that parish, and we subsequently resolved to place a similar restriction upon the numbers boarded in eight other parishes in the county which contained villages in which the numbers had become considerable. The Circular intimating this restriction will be found at page 157 of the Appendix to this Report.

VI. INSTRUCTIONS AND CIRCULARS ISSUED BY THE BOARD.

Re-issue of Instructions to Inspectors of Poor.

We have prepared and issued to Inspectors of Poor an amended set of instructions for their guidance in the disposal and management of pauper lunatics. These instructions, dated 6th November 1895, are printed at page 138 of the Appendix.

Circular as to Restraint and Seclusion.

We have thought it advisable to amplify somewhat our former instructions with regard to the employment of restraint and seclusion in the treatment of patients in asylums, and we have called for quarterly returns of all entries in the register of restraint and seclusion. Our circular on this subject will be found at page 156 of the Appendix.

Circular restricting growth of number of Patients in certain Parishes of Fife.

An explanation has been given above of the circumstances under which we issued the circular of 27th January 1896, restricting the increase in the number of patients in certain parishes of Fifeshire. It will be found at page 157 of the Appendix.

Position of Districts.

VII. POSITION OF DISTRICTS.

For lunacy purposes Scotland is at present divided into the following Districts:—

List of Districts and Counties which form them.

Counties from which the different Districts are formed.	Districts arranged geographically.
Shetland,	1. Shetland District.
Orkney,	2. Orkney do.
Caithness,	3. Caithness do.
Inverness, Nairn, Ross, and Sutherland,	4. Inverness do.
Elgin,	5. Elgin do.
Banff,	6. Banff do.
Aberdeen,	7. Aberdeen do.
Kincardine,	8. Kincardine do.
Forfar,	9. Forfar do.
Perth,	10. Perth do.
Stirling, Dumbarton, Linlithgow, and Clackmannan,	11. Stirling do.
Fife and Kinross,	12. Fife and Kinross District.

Counties from which the different Districts are formed.	Districts arranged geographically.	Position of Districts.
Edinburgh and Peebles,	13. Edinburgh Urban District, formed of the following three parishes belonging to the County of Midlothian, namely—(1) Edinburgh, (2) Leith, and (3) Duddingston.	List of District and Counties which form them.
	14. Midlothian and Peebles District, formed of the remaining parishes of Midlothian and of the County of Peebles.	
Haddington,	15. Haddington District.	
Roxburgh, Berwick, and Selkirk,	16. Roxburgh do.	
Lanark,	17. Barony do.	Formed in 1888 out of the Glasgow District—with a portion of the Renfrew District in the case of Govan.
	18. City of Glasgow do.	
	19. Govan do.	
	20. Lanark do.	
Renfrew,	21. Renfrew do.	
Argyll,	22. Argyll do.	
Bute,	23. Bute do.	
Ayr,	24. Ayr do.	
Dumfries, Kirkcudbright, and Wigtown,	25. Dumfries do.	

The District of Shetland continues to be dependent on the Royal Shetland Asylum at Montrose for the accommodation of its pauper lunatics. District.

Pauper lunatics belonging to the Orkney District, who require removal from home, are received into the Edinburgh Royal Asylum. Orkney District. A considerable number of lunatics from parishes in Orkney are accommodated in the Montrose Royal Asylum, but not under a formal agreement.

Under an agreement with the Managers of the Montrose Royal Asylum, pauper lunatics belonging to the Caithness District, who need asylum treatment, continue to be sent to that establishment. Caithness District.

The pauper lunatics of the Inverness District, which includes the counties of Inverness, Nairn, Ross, and Sutherland, continue to be accommodated in the District Asylum at Inverness. Plans for enlargement of the asylum by the erection of hospital wings have been approved of by us, and are in course of being carried out. Inverness District.

The extension of the Elgin District Asylum has been completed, Elgin District. and the asylum now provides adequately for the wants of the District.

The wants of the Banff District are adequately met by the asylum Banff District. at Ladysbridge.

The pauper lunatics of the Aberdeen District are accommodated in the Aberdeen Royal Asylum, under an agreement between the Directors of the Asylum and the District Lunacy Board, and in the Lunatic Wards of the East and West Poorhouses of Aberdeen, and of the Buchan Poorhouse. The accommodation of the Royal Asylum will be greatly increased and improved on the completion Aberdeen District.

**Position of
Districts.****Aberdeen
District.**

of the separate hospital, which is in course of erection, and the extensive internal changes in the main building, which have been determined on, will effect an important and much needed improvement; but in view of the increasing number of patients, and of the long period which has elapsed since the asylum was first recognised as being overcrowded, it seems probable that the question of its further extension will require immediate consideration.

**Kincardine
District.**

The agreement between the Kincardine District Lunacy Board and the Managers of the Montrose Royal Asylum remains in force. The wants of the District are met by this institution and the Lunatic Wards of the Kincardine Poorhouse at Stonehaven.

Forfar District.

The pauper lunatics of the Forfar District are accommodated in the Royal Asylums of Dundee and Montrose, under agreements with the Forfar District Lunacy Board, and in the Lunatic Wards of the East and West Dundee Poorhouses.

Perth District.

The District Asylum at Murthly and the Lunatic Wards of the Perth Poorhouse provide accommodation for the pauper lunatics of the Perth District. The improvement and extension of the District Asylum, by the erection of two separate buildings for convalescent patients, has been completed as regards the block for females, which is now occupied. The block for males is approaching completion. The wings of the main building are being converted into hospital sections. The acquisition of more land, which has been under the consideration of the District Board for some time past, has been accomplished by the purchase of 34 additional acres immediately adjoining the asylum, 13 of which had previously been rented.

**Stirling
District.**

The pauper lunatics of the Stirling District are accommodated in the District Asylum at Larbert and in the Lunatic Wards of the Linlithgow and Dumbarton Poorhouses. The population of the asylum has increased so rapidly that, although the new hospital has only recently been completed, a further extension of the accommodation has become necessary. Plans have been approved of for enlarging the asylum by duplicating the separate block for easily-managed patients and adding to it a dining-hall.

**Fife and Kin-
ross District.**

The pauper lunatics of the counties of Fife and Kinross continue to be provided for in the District Asylum at Springfield, near Cupar. A fully-equipped separate hospital, which is almost completed, will enable the asylum to meet the present wants of the District satisfactorily.

**Edinburgh
Urban District.**

The Urban District of Edinburgh is supplied with asylum accommodation by the Royal Edinburgh Asylum. Harmless and incurable patients belonging to the City Parish of Edinburgh are received into the Lunatic Wards of one of the Poorhouses belonging to that parish. The pressure on the accommodation of the Royal Asylum has become so great that an early settlement will be necessary of the question as to how adequate accommodation for the District is to be provided in future.

The pauper lunatics of the Mid-Lothian and Peebles District are accommodated in the District Asylum at Rosewell, and to a small extent in the Lunatic Wards of the Inveresk Combination Poorhouse.

Position of Districts.
Mid-Lothian and Peebles District.

The pauper lunatics of the Haddington District are accommodated in the Haddington District Asylum, and to a small extent in the Lunatic Wards of Inveresk Combination Poorhouse. The District Asylum has become overcrowded, and plans for extending it are being prepared.

Haddington District.

The Roxburgh District Asylum at Melrose provides accommodation for the pauper lunatics of the counties of Roxburgh, Berwick, and Selkirk. Plans for extending it by the erection of a separate hospital for female patients have been approved of. The land which is attached to the asylum—35 acres, including the site of the buildings—is inadequate to provide suitable employment for the male patients.

Roxburgh District.

Asylum accommodation for the Barony Lunacy District continues to be adequately supplied by the Barony Parochial Asylum at Lenzie.

Barony District.

The pauper lunatics of the City of Glasgow Lunacy District are at present provided for in the Kirklands Asylum at Bothwell (formerly the Glasgow District Asylum, and now managed by a Joint Committee of three of the District Lunacy Boards formed out of the Glasgow District), the Glasgow Royal Asylum, the Glasgow City Parochial Asylum, and in asylums beyond Lanarkshire. The new District Asylum, in course of erection at Gartloch, is approaching completion.

City of Glasgow District.

The pauper lunatics of the Govan Lunacy District are accommodated in the new District Asylum at Hawkhead, Paisley, which was opened for the reception of a limited number of patients on 18th September 1895, the Kirklands Asylum at Bothwell, the Glasgow Royal Asylum, the Govan Parochial Asylum, and in asylums beyond Lanarkshire.

Govan District.

The Lanark District, which consists of all the parishes of Lanarkshire, with the exception of the parishes of Barony, Glasgow City, and Govan, was disjoined in 1888 from the District formerly known as the Glasgow District, and erected into a separate District. The pauper lunatics of the District are accommodated in the new District Asylum at Hartwood, Shotts, which was opened for the reception of patients on 15th May 1895, in the Kirklands Asylum at Bothwell, and in the Lunatic Wards of the Poorhouses at Hamilton and Old Monkland.

Lanark District.

The pauper lunatics of the Renfrew District are accommodated in the two Parochial Asylums of Paisley, at Riccartbar and Craw Road (formerly Abbey Asylum), and in Greenock Parochial Asylum. The fact that these three asylums (or asylums of which the existing buildings are representative) were in existence in 1857, and

Renfrew District.

Position of
Districts.Renfrew
District.

provided sufficiently for the wants of Renfrewshire, made the erection of a Renfrew District Asylum unnecessary; but the maintenance of this arrangement for the accommodation of the pauper lunatics of the District in the Parochial Asylums is only made possible by the existence of agreements for the reception of patients between the two parishes which possess asylums, and all the other parishes of the District. The following shows the parishes of Renfrewshire for which each asylum provides accommodation at the present time:—

Greenock Parochial Asylum.

Provides
Accommo-
dation for { Greenock.
Port-Glasgow.
Cathcart.
Kilmalcolm.
Gourock.

Paisley Parochial Asylum
at Riccartonbar.

Provides
Accommo-
dation for { Paisley.
Neilston.
Renfrew.
Kilbarchan.
Houston.
Inchinnan.
Erskine.

Paisley Parochial Asylum at Craw
Road (formerly known as Abbey
Parochial Asylum).

Provides
Accommo-
dation for { Paisley.
Eastwood.
Mearns.
Eaglesham.
Lochwinnoch.

Argyll and
Bute Districts.

The pauper lunatics of the Districts of Argyll and Bute are accommodated in the District Asylum at Lochgilphead, which is being enlarged and improved in a way which will add greatly to its efficiency. The 50 acres, including the ground occupied by buildings and roads, which is all the extent of land attached to the asylum, is quite inadequate for an asylum of its size.

Ayr District.

The pauper lunatics of the Ayr District are accommodated in the Ayr District Asylum and in the Lunatic Wards of the Cunninghame Combination Poorhouse. The recent extension of the District Asylum has done no more than relieve the overcrowding from which it has suffered for some time past. It is again overcrowded, and the question of its further extension is under consideration.

Dumfries
District.

The pauper lunatics of the Dumfries District, which consists of the counties of Dumfries, Kirkcudbright, and Wigtown, are accommodated in the Second House of the Crichton Royal Institution and in the Lunatic Wards of the Wigtown Poorhouse.

Causes of
Death of
Patients in
Asylums.

VIII CAUSES OF DEATH OF PATIENTS IN ASYLUMS.

Examination
of Table X (a)
of Appendix.

Table X(a) of Appendix A shows the average percentage of each cause of death in Royal and District Asylums during the thirty-eight years, 1858-95. We do not propose to continue this table

further, as we think that at this stage of its growth since 1858 it yields all the facts of interest which it is capable of yielding, and that the statistics from which it is constructed would require to be put into other shapes if fresh matters of interest with regard to the causes of death of the insane are to be brought to light.

Causes of Death of Patients in Asylums.
—
Examination of Table X (a) of Appendix.

Taking all the deaths from each specified cause in the Royal and District Asylums of Scotland during the period of thirty-eight years from 1858, or for the shorter period during which any asylum may have been in existence, and calculating the proportion of each assigned cause in every 100 of the total number of deaths, the broad facts shown by the totals of the table (General Averages) will be found in the following tabular statement:—

Causes of Death tabulated according to Classes.	Percentage of each Cause of Death on Total Deaths from 1858 to 1895.		
	Both Sexes.	Males.	Females.
Cerebral and Spinal,	39·5	46·9	32·1
Thoracic,	35·2	32·8	37·7
Abdominal,	7·7	6·5	9·0
Fever, Erysipelas, Cancer, &c.,	15·9	11·8	19·9
Suicides and Accidents,	1·7	2·0	1·3
	100·0	100·0	100·0

If we go back for a period of twenty years and examine the figures accumulated during the eighteen years preceding, the following results are shown:—

Causes of Death tabulated according to Classes.	Percentage of each Cause of Death on Total Deaths from 1858 to 1875.		
	Both Sexes.	Males.	Females.
Cerebral and Spinal,	39·8	47·5	32·1
Thoracic,	33·7	30·6	36·8
Abdominal,	8·9	7·4	10·5
Fever, Erysipelas, Cancer, &c.,	15·4	12·1	18·7
Suicides and Accidents,	2·1	2·4	1·7
Unknown,	0·1	...	0·2
	100·0	100·0	100·0

It will be seen from this tabular statement that the results yielded by the figures of the earlier period, 1858-75, are practically the same as those shown by the figures of that period combined with those of the twenty years succeeding. In other words, the addition of the figures of the last twenty years has resulted in disclosing no new fact of value.

If the classes of fatal disease are analysed, and the results of the earlier period are compared with the results of the whole period from 1858 to 1895, the following tabular statement, dealing with certain

Causes of
Death of
Patients in
Asylums.

Examination
of Table X (a)
of Appendix.

of the outstanding causes of death among the insane, will show that facts of scarcely greater interest are disclosed :—

Proportion of Deaths from each Specified Cause in every 100 Deaths from all Causes.								
Years.	General Paralysis.		Other Forms of Brain and Spinal Disease.		Consumption.		Other Forms of Thoracic Disease.	
	M.	F.	M.	F.	M.	F.	M.	F.
1858-75	18·7	4·8	28·8	27·3	14·8	22·0	15·8	14·8
1858-95	19·2	4·7	27·7	27·4	13·4	17·7	19·4	20·0

These figures show practically no change between the earlier period and the whole period as regards General Paralysis and Other Forms of Brain and Spinal Disease. They indicate a falling off in the proportion of deaths from Consumption, and a considerable increase in the proportion of deaths from Other Forms of Thoracic Disease, an indication of a change which will be afterwards referred to.

A consideration of these tabular statements will show the inconclusiveness beyond a certain point of a table in the form of Table X(a). It deals only with the proportion over a lengthened period which one cause of death bears to another. A comparison of the earlier with the later of these tables does not show at all, or only very slightly indicates, the progress from year to year of specific causes of death among the insane. During a year, or series of years for instance, there might be a remarkable increase of deaths from a specific cause, but all trace of the extent of the rise would be wholly, or almost wholly, obliterated, from the fact that a much longer preceding period may show a low proportion of deaths from that specific cause; and if the proportion of deaths from any cause is somewhat increased, this increase necessarily involves the lowering of the proportion of some other cause of death, which nevertheless may also be progressing.

Other changes may have taken place during the period covered by Table X (a), upon which the proportions given in the table throw practically no light. The certifying medical men have, in many cases, been succeeded since the table was begun, by others holding new views; and where the same medical men remain, their views may have undergone change, or the diagnosis of disease may be carried out with greater care and with a wider experience, and the causes of death may be more searchingly sought for, and more accurately determined. The practice in tabulating returns of death in our office has been, where there are several causes returned as contributing to death, to record the cause first named in the notice of death as being that of which the patient died; but when two or more of these causes are each, or all of them, sufficient of themselves to account for death, there may be room for considerable difference of opinion as to what cause should be returned as the primary cause. Different views in such a case may be taken by different medical men, and even the same medical men may not

always take the same view as to the order in which the contributing causes should be placed. All these considerations tend to deprive of scientific accuracy, the figures in this and similar tables showing recorded causes of death; indeed, it is doubtful if they can properly be considered as more than estimates, although they are estimates which, in the case of Table X (a). and of Table X (b). which follows it, it is believed may, on the whole, be accepted as substantially expressing the truth. But it is certain that all trace of the effects of such changes as are referred to is lost in the numerous interchanges between one cause and another, when they are expressed merely in the fluctuating proportion which one assigned cause of death bears to the total death-rate. In order to estimate the death-rate assigned to any specific cause, it would be necessary to ascertain the actual number of deaths returned as from that cause, and to calculate from that number the frequency of its occurrence in relation to a standard, or standards, altogether outside the general death-rate.

Causes of
Death of
Patients in
Asylums.
—
Examination
of Table X (a)
of Appendix.

If Table X (a) be looked at from the results shown by individual asylums, which was the point of view from which the table was originally constructed, facts of a more interesting character are disclosed. We have frequently had occasion to refer to the great proportion of deaths from General Paralysis among male patients in asylums which draw their population from large cities, as compared with those whose inmates are drawn chiefly from smaller towns and rural localities. This subject was fully discussed in our Eighteenth Report (pp. xvii-xviii), and the figures given in Table X (a) are sufficient to show that what was found to be true in 1874 is equally true at the present time. If we look at the proportion of deaths from General Paralysis to the total death-rate of the Royal and District Asylums which draw their population mainly from the large cities of Aberdeen, Dundee, Edinburgh, and Glasgow, it will be seen that the proportion to the general death-rate of male patients in these asylums ranges from 19·8 in the Glasgow Royal Asylum to 28·2 in the Edinburgh Royal Asylum. In another class of asylums which draw their population chiefly from smaller urban communities and from mining districts, the range is from 20·2 in the Midlothian Asylum to 12·0 in Murray's Royal Asylum; while in asylums having a population of a purely rural character, the range is from 5·8 in the Inverness District Asylum to 7·9 in the Elgin District Asylum.

The only exception to this general statement occurs in the case of the Banff District Asylum, drawing its inmates from a healthy rural and fishing population, which shows among its males a proportion of deaths ascribed to General Paralysis of 17·0. Turning to its neighbour, the Elgin District Asylum, which draws its inmates from a population of precisely similar character, we find that the proportion of deaths among male patients ascribed to the same cause stands at 7·9—or considerably less than half the proportion shown by Banff. On the other hand, the proportion of deaths among male patients ascribed to Apoplexy and Paralysis stands at 13·6 in the Banff Asylum, and at 24·4 in the Elgin Asylum. That the difference shown is due merely to a difference of medical view, or a difference of method in returning the cause of death, is rendered highly probable from the fact that, notwithstanding the great inequalities shown between the two asylums in the proportions under specific heads, if the total proportion of deaths of both

Causes of
Death of
Patients in
Asylums.

Examination
of Table X (a)
of Appendix.

sexes under the generic head 'Cerebral and Spinal Affections' is examined, it will be found that the proportion for each asylum is almost precisely the same, that for the Banff Asylum being 36·2, and for the Elgin Asylum 36·7. The figures relating to these asylums are mentioned as an illustration of the uncertainty of returns as to causes of death; but it should be borne in mind that they merely profess to show the proportion which one specified cause of death bears to 100 deaths from all causes, and that in the case of these two asylums the proportions are founded upon very small numbers. During the 30 years in which the Banff District Asylum has been open, the actual number of deaths among males ascribed to General Paralysis was only 15, and the number ascribed to the same cause in the Elgin District Asylum, during 38 years, has only been 10.

Some remarkable differences are shown between the proportion of deaths in the different asylums ascribed to Consumption and Other Forms of Thoracic Affections; but for the reasons already stated in speaking of the General Averages of Table X (a), it would be fruitless to make inquiries into these differences founded only upon the proportions which any specified cause of death in one asylum bears to the proportion in another asylum. Where the difference is seen to be remarkable it may be inferred that there are circumstances calling for investigation, but as to the extent and significance of such differences no safe conclusion can be drawn from the figures of Table X (a). In order to arrive at useful conclusions it would be necessary, as has been said in speaking of the general results shown, to ascertain the proportion which the actual numbers ascribed in each asylum to each specific cause bears to some fixed standard or standards, other than the total number of deaths, and to take into consideration other factors, such as length of residence, age at admission, and age at death. Such an investigation we have not at present the means of undertaking usefully, though we continue to publish in Table XXII., as we have done since 1858, the number of deaths from each specific cause in each establishment for the insane, and the material for such an investigation is thus so far provided.

Substitution
of Table X (b)
of Appendix
for Table X (a).

We propose in future to substitute for Table X (a) a table in the form of Table X (b) of Appendix A. This table shows, for all establishments for the insane in Scotland, for each year from 1870 onwards, the average number resident in all establishments for the insane, the total number of deaths, the proportion of deaths which took place within a year of admission, and the number of deaths from each specified cause. The table further shows the absolute annual average of the foregoing numbers for each period of five years, and the average proportion of each cause of death during each period of five years in every 100 deaths during that period.

Deaths from
Cerebral and
Spinal Disease.

The following Table I, founded upon the figures of Table X (b) of the Appendix, shows for each sex, and for both sexes together, the proportion, per 1000 of the average number of patients resident in establishments, of all deaths from Cerebral and Spinal Disease, and from each cause specified under that class, for each period of five years from the beginning of 1870 to the close of 1894:—

TABLE I.

YEARS.	PROPORTION, PER THOUSAND OF THE AVERAGE NUMBER OF PATIENTS RESIDENT, OF DEATHS DURING EACH QUINQUENNIAL											
	From Apoplexy and Paralysis.			From Epilepsy and Convulsions.			From General Paralysis.			From Maniacal and Melancholic Exhaustion.		
	From Organic Disease of the Brain, Tumours, &c.			From All foregoing Forms of Cerebral and Spinal Disease.								
	M.	F.	Both Sexes.	M.	F.	Both Sexes.	M.	F.	Both Sexes.	M.	F.	Both Sexes.
1870-74	6.9	6.4	6.6	5.6	4.1	4.8	14.6	3.7	8.9	2.1	4.9	3.6
1875-79	8.1	6.0	7.0	5.9	4.2	5.0	15.8	2.5	8.8	3.0	4.6	3.9
1880-84	8.9	5.8	7.3	5.2	3.0	4.1	13.5	2.8	7.9	2.3	3.9	3.1
1885-89	7.2	5.4	6.3	4.8	2.9	3.8	14.9	3.6	9.1	2.0	4.0	3.0
1890-94	5.5	5.4	5.4	5.2	3.3	4.2	20.0	3.8	11.6	3.1	4.3	3.7
1870-94	7.2	5.7	6.4	5.3	3.5	4.3	16.0	3.3	9.4	2.5	4.3	3.5
										9.7	7.9	8.8
										40.7	27.4	32.4

Causes of Death of Patients in Asylums.

Causes of
Death of
Patients in
Asylums.

Relative Lia-
bility of the
Sexes to Cere-
bral and Spinal
Disease.

The figures of this table afford an indication of the relative liability to grave diseases of the nervous centres of the two sexes. The averages for the whole period dealt with show that, from all forms of Cerebral and Spinal Disease, 41 males die per 1000 patients resident for every 25 females. From General Paralysis the male deaths are five times as numerous as the female, 16 males per 1000 resident dying from this cause to every 3 females. A preponderance of deaths among males is also shown under Apoplexy and Paralysis to the extent, per 1000 patients resident, of 7 male deaths to every 6 female deaths; under Epilepsy and Convulsions, of 5 male deaths to every 3 female deaths; under Organic Disease of the Brain, of 10 male deaths to every 8 female deaths. The only exception occurs in the case of deaths from Maniacal and Melancholic Exhaustion, where, on the contrary, the male deaths are returned in the proportion of 2 to every 4 female deaths.

Rise in Num-
ber of Deaths
from Cerebral
and Spinal
Disease in
years 1890-94.

The figures of this table will naturally be examined to see if, or to what extent, they afford evidence of an increase of diseases of the nervous centres. It will be seen from the last column of the table that in the quinquenniad 1870-74 the number of deaths recorded as from such diseases was 33·5 per 1000 patients resident; that in the three succeeding quinquennials the proportion fell and remained fairly steady, reaching, however, its lowest point in 1880-84, when the proportion was 30·0; but that in the last quinquenniad a sudden leap took place from 30·9 to 35·9 per 1000 patients resident, an increase of 16 per cent. Comparing the earliest quinquenniad, 1870-1874, with the latest, the increase in the latter period from all forms of Cerebral and Spinal Disease is 7 per cent. In the case of male deaths from General Paralysis the rise was greater, being no less than from 14·6 to 20·0 per 1000 patients resident, an increase of 37 per cent. But in judging of the figures under any special head it would be proper to keep in mind what has been already said as to the liability, to a certain extent, of interchanges taking place in the record of deaths under one head and another. It is certainly suggestive of the probability of such interchanges taking place when we find that in periods in which the record of deaths from General Paralysis is highest are among the lowest recorded under Apoplexy and Paralysis; and that the highest records under the latter heading are among the lowest under General Paralysis. The sudden increase in the last quinquenniad is not, however, confined to General Paralysis. It is shown also under Epilepsy and Convulsions, Maniacal and Melancholic Exhaustion, and Organic Disease of the Brain. It will be observed that but for this sudden increase in the years 1890-94 the table would afford no evidence whatever of any rise in the number of deaths from disease of the nervous centres generally. Indeed, comparing the earliest period with the penultimate period, it will be seen that there is a decided fall. The increase in the last period of five years is, however, so great that it deserves further consideration.

Rise in Death-
rate in 1890-94
not confined to
Cerebral and
Spinal Disease.

It will be seen from Table II., which follows, that the rise in the death-rate during the five years 1890-94 is not confined to Cerebral and Spinal Diseases, but is more or less common also to other classes of disease :—

TABLE II.

YEARS.	PROPORTION, PER THOUSAND OF THE AVERAGE NUMBER OF PATIENTS RESIDENT, OF DEATHS											
	THORACIC DISEASES.						From Fever, Erysipelas, Cancer, &c.			From General Debility and Old Age.		
	Consumption.			Inflammation of Lungs and Membranes and other forms of Pulmonary Disease.			Heart Disease, Aneurism, &c.					
	M.	F.	Both Sexes.	M.	F.	Both Sexes.	M.	F.	Both Sexes.	M.	F.	Both Sexes.
1870-74	11.5	15.9	13.8	11.0	8.4	9.6	5.5	5.3	5.4	9.6	12.9	11.3
1875-79	11.1	11.8	11.5	11.0	7.8	9.3	6.0	5.8	5.9	8.3	13.3	10.9
1880-84	9.3	12.0	10.7	11.1	8.6	9.8	6.8	7.6	7.2	7.2	12.0	9.7
1885-89	9.4	10.5	10.0	10.5	8.6	9.5	7.1	8.6	7.9	5.7	10.2	8.0
1890-94	11.0	11.1	11.0	11.0	9.9	10.4	8.6	9.0	8.8	5.3	8.6	7.0

Causes of
Death of
Patients in
Asylums.

Causes of
Death of
Patients in
Asylums.

Rise in Death-
rate in 1890-94
not confined to
Cerebral and
Spinal Disease.

This table shows an increase in the proportion of deaths per 1000 resident from all forms of Thoracic Disease, and also under the heading 'Fever, &c.,' and it thus appears highly probable that the rise in the death-rate in 1890-94 from Cerebral and Spinal Disease is due, at all events to some extent, to causes which have increased the death-rate generally, and which have no necessary connection with diseases of the nervous centres.

With a view to disclosing more fully what occurred in the quinquenniad 1890-94, the following table has been prepared showing the proportion of deaths during each of these years from selected causes, and also the average death-rate from all causes per 1000 patients resident :—

TABLE III.

YEAR.	Proportion of Deaths per 1000 Patients Resident in Establishments.			
	From General Paralysis.	From all forms of Cerebral and Spinal Disease.	From all forms of Thoracic Disease and from Fever, &c.	From all Causes.
	Males.	Both Sexes.	Both Sexes.	Both Sexes.
1890	19·5	35·1	32·6	81·5
1891	19·6	36·7	43·7	94·8
1892	20·3	36·0	36·7	86·6
1893	21·4	38·0	33·4	85·1
1894	19·2	34·1	31·6	78·0

Effects of Epi-
demic of In-
fluenza.

The figures of this table coincide generally with the appearance and course of the epidemic of Influenza which occurred in the years 1890, 1891, and 1892, the deaths in the general community ascribed to influenza being in these years 830, 2387, and 1786 respectively. This disease was, as might be expected in a community of low vitality, peculiarly fatal among the inmates of asylums. If Influenza may not have been always so directly fatal as to lead to death being ascribed to that specific cause, it must, in the case of many patients already moribund from such diseases as General Paralysis or Organic Brain Disease, have been sufficient, either from its immediate or ultimate effects, to give the slight impetus required to cause death, and in such cases the Cerebral Disease from which the patient's death was already approaching would probably be regarded and returned as the primary cause of death. It is true that the increased proportion of deaths, both from General Paralysis and from Cerebral and Spinal Disease generally, is prolonged beyond the period during which Influenza was specially prevalent, reaching their highest points in the year 1893; but it may be that this prolonged increase is to some extent the deferred expression of weakening influences due to Influenza and allied ailments.

Possibly these considerations may not be thought to account fully for the increase of diseases of the nervous centres shown in the years 1890-94, but they are sufficient, especially in view of the results shown in the earliest quinquenniad embraced in Table I., to show that conclusions should not be hastily formed as to the teaching of the figures for the latest quinquenniad. Another reason for caution in drawing conclusions as to an increase of Cerebral and Spinal Diseases from the figures of 1890-94 is, the suddenness of the rise in that period. Every census return from 1871 onwards shows that the population of the country is being drawn from rural districts and small towns to the large urban centres, and in the case of General Paralysis there is abundant evidence that it is a disease which occurs most frequently under the conditions of urban life. It might therefore be expected that such influence on the statistics of General Paralysis as may follow this movement of population would be gradual, and would not manifest itself suddenly in the years 1890-94. On examining Table I., however, it will be seen that the figures referring to General Paralysis lend no support to the view that any increased tendency to this disease showed itself in the nineteen years from 1870 to 1889.

Causes of
Death of
Patients in
Asylums.
General
Paralysis.

There are several considerations which place General Paralysis in a peculiar position among the causes of death of the insane in establishments. Patients seldom, or perhaps in true cases never, recover from it, and once placed in an asylum they, speaking broadly, remain there till death takes place. In some cases the malady may not appear, or may not be definitely recognised, till after admission; but, on the whole, it may be said that the number of deaths from General Paralysis is the same as the number of those who were labouring under it or who bore its seeds on admission. The course of the disease is usually short. From an inquiry on the subject made in our Eighteenth Report (pp. xvii-xviii), it was found that 46 per cent. died within one year after admission, 75 per cent. within two years after admission, and 96 per cent. within five years after admission; but of course many patients are far advanced in the disease before admission to the asylum takes place. From these considerations it may be inferred that the number of deaths in asylums ascribed to this cause is, under certain reservations, more likely to be a true index to the frequency of its occurrence in the community than any other index available.

As, however, the patients who keep up the population of asylums are those of long residence, and therefore suffering under the less fatal forms of disease, it may seem to be unsafe to calculate the death-rate from General Paralysis upon the average number resident. It has therefore been thought that it may be of interest to show, as is done in the following table, the deaths from General Paralysis in quinquennial periods, calculated upon the number of admissions in each period:—

Causes of
Death of
Patients in
Asylums.

General
Paralysis.

TABLE IV.

Quinquennial Periods.	Proportion per 1000 of Deaths from General Paralysis on the Admissions (excluding transfers) to Establishments during each period.		
	Males	Females.	Both Sexes.
1870-74 . . .	47·8	11·9	28·6
1875-79 . . .	48·6	8·0	27·5
1880-84 . . .	45·7	9·2	26·3
1885-89 . . .	53·9	12·5	32·0
1890-94 . . .	67·0	12·8	39·0

This table shows the same drop in the middle period—1880-84—which is observable in Table I. It shows a much smaller increase in the last period as compared with the immediately preceding period, but this arises merely from the fact that the rise shown in the penultimate period itself is much greater than the rise shown for that period in Table I. The rise shown by Table IV. in the earliest period, as compared with the latest, is greater than the rise between these two periods shown in Table I., and the figures of Table IV., are rather more strongly indicative of a progressive rise. The following table shows the percentages of increase arrived at by the basis of calculation used respectively in each of these tables:—

TABLE V.

Percentage of Increase of Deaths from General Paralysis in the Period 1870-74, as compared with the Period 1890-94,						
Percentage of Increase of Period 1890-94 over Period 1870-74	Calculated on the Average Number Resident in Establishments.			Calculated on Admissions to Establishments, excluding Transfers.		
	Males.	Females.	Both Sexes.	Males.	Females.	Both Sexes.
	37	3	29	40	8	36

Making every allowance for the causes of error which have been already referred to, and for such incidental effects as may have been caused by the epidemic of Influenza, the increase of deaths attributed to General Paralysis, as disclosed by the foregoing figures, is remarkable. And perhaps it should be pointed out that even as regards Influenza the effects do not go quite

so far to explain the increase shown in the last period dealt with as might at first sight seem to be the case. There was, as will be seen from Table VII. of Appendix A, a great rise in the admission rate during the period 1890-94. Though other causes were doubtless at work in producing the rise in the admission rate during this period, yet in many cases the cause of insanity during that period was directly attributed to the effects of Influenza; and so far as that malady may have tended to increase the admission rate, the effect would be to diminish the proportion of deaths from General Paralysis calculated on admissions, because where General Paralysis was recognised as the cause of insanity it is improbable that any other would be assigned except as a subordinate cause. It may therefore be concluded that patients for whose insanity Influenza was assigned as a cause would not be suffering from General Paralysis. An increase of admissions from the effects of Influenza, and indeed from all causes other than General Paralysis, would, of course, tend to diminish the proportion of deaths from General Paralysis calculated on the admissions generally.

Causes of
Death of
Patients in
Asylums.

General
Paralysis.

As General Paralysis is a disease which has been recognised as being specially the product of urban communities, and as urban communities are yearly growing greater at the expense of the population of rural communities, it may be held that an increase of deaths from General Paralysis must, so far as present experience goes be an inevitable result of the change in the character of the population of the country. It seems certain that an increase of deaths from General Paralysis in the community generally must be to some extent a concomitant of the change of population indicated, unless the tendencies to that disease are counteracted by improved conditions of life in large cities. But this change is not one of yesterday, and if we go back more than ten years ago it will be seen that the figures relating to deaths from General Paralysis and disease of the nervous centres generally afford no evidence of an increase.

It may be that the rise shown in the death-rate from General Paralysis in the last two quinquennials, so far as the special considerations already referred to may be insufficient of themselves to explain it, is due to the fact that there is a growing appreciation of the usefulness of asylums looked at as hospitals, and that they are being increasingly taken advantage of for the care and nursing, till death takes place, of many patients suffering from the milder forms of General Paralysis, who in former times would have died at home or in institutions for the ordinary sick and feeble.

In any case, it is certainly desirable to suspend judgment upon such increase as is shown in the case of General Paralysis and other forms of Cerebral and Spinal disease until further experience may have thrown more light on the subject.

Turning again to Table II. it will be seen from the last column that there is a steady and progressive diminution in the population of deaths returned as due to General Debility and Old Age. This declining number, no doubt, arises from a desire to attain greater accuracy in arriving at the causes of death, and to avoid, as far as possible, the use of indefinite terms in the

General
Debility and
Old Age.

Causes of
Death of
Patients in
Asylums.

General
Debility and
Old Age.

returns of such causes. Notwithstanding this steady tendency to reduction of returns under this heading, it may at first sight seem surprising that this reduction should have been carried down even into the last quinquenniad—the period of the Influenza epidemic, which is shown to have caused such a marked rise under other heads. But a consideration of the facts will show that this result is only what might be expected. Old and feeble patients sinking gradually under general decay of vital powers must have succumbed to the effects of Influenza as readily as feeble persons labouring under active forms of Cerebral and Spinal Disease; but in the case of the latter patients, the effects of Influenza would only be regarded by the certifying physician as a contributory cause to the specific malady under which the patient was labouring, which specific disease would, as has been already said, thus continue to be regarded and returned as the primary cause; whereas, in the case of old and feeble patients not sinking under a specific disease recognised as present during life, death occurring after an attack of Influenza would, in the absence of other specific cause, be returned as due to Influenza, and would thus be tabulated under such a heading as ‘Fever.’

Consumption.

With regard to the results shown under other heads of Table II., it will be seen that there is an indication of a decreased death-rate from Consumption; but the results shown under that head cannot be usefully discussed without a reference to the numbers resident at different ages, which we are not this year in a position to make.

Diseases of
Respiratory
Organs other
than Con-
sumption.

It is known from the statistics furnished by the Registrar-General that many more males die from affections of the respiratory organs than females. In the general community this is an inevitable result of the exposure to which males are from the nature of their callings subjected, and the effects can only be controlled by a more widely spread understanding of and attention to the laws of health. But in asylums the extent and effects of exposure may be said to be under complete control, and in them it may be held, at all events theoretically, that there is no reason why deaths from affections of the respiratory organs should be more frequent among males than among females, if strict attention is paid to the employment of males only in work in which they are fit to engage, and if care is taken to clothe them suitably, to protect them from extremes of temperature, and to see that they are supplied with dry clothing when their work is over. It will be noted, therefore, with satisfaction that the figures of Table II., under the heading ‘Inflammation of Lungs and Membranes and other Forms of Pulmonary Disease,’ show a tendency in later years to a greater approximation in the death-rate from these causes as between the two sexes. In the two earliest quinquennials the excess per 1000 patients resident of male deaths from these causes over female deaths was 2·6 and 3·2 respectively; in the two last quinquennials the excess was only 1·9 and 1·1.

Asylum
Accommoda-
tion for Private
Lunatics.

IX. ASYLUM ACCOMMODATION FOR PRIVATE LUNATICS.

There is abundant accommodation in Scotland for private patients belonging to the more opulent classes of the community, and it is

probable that such accommodation will always be adequately supplied either in public or in private establishments.

The provision made for the poorer class of private patients who require asylum treatment, that is, for those who cannot pay a rate of board above or much above the rate charged for pauper patients, is, however, less complete at present than is desirable. Private Asylums which received patients at the lowest rates of board were never regarded as satisfactory, and we are therefore glad to be able to state that such institutions have been for many years all but extinct in Scotland. Those District Asylums which happen to possess vacant accommodation receive a considerable number of the poorer class of private patients, in some instances at rates not exceeding the pauper rate of the District served by the asylum, but in most cases at rates which are sufficient to leave some profit to the institution. In the actual circumstances of the country, Districts Asylums perform a useful public service in receiving patients at low rates of board as private patients. It would at present be difficult, if not impossible, to provide elsewhere for the private patients accommodated in such asylums, except as pauper patients. Their reception at low rates of board, on the footing of private patients, tends to the relief of the poor-rate, as it not infrequently leads to the cost of the maintenance of patients being defrayed by friends, who, if the patients had to submit to the stigma of pauperism in order to obtain treatment, would probably decline to give any assistance beyond what they might be legally compelled to give.

Asylum
Accommoda-
tion for Private
Lunatics.

The reception of private patients into District Asylums is, however, not wholly unattended with evils. There is an absence of security to the patients that the arrangement will be permanent, as the accommodation must, when need arises, be resumed for the use of the pauper insane for whom it was provided. But a more serious evil connected with the reception of private patients into District Asylums is likely to arise when patients are received, in any considerable number, at rates which yield a profit, as in such circumstances a temptation is held out to overcrowd the asylum in order to avoid the loss which would be involved by their removal.

The institutions into which it would be desirable that all patients of small means should be received are the Royal and Chartered Asylums. These asylums are distributed over the country in such a way as to make them fairly convenient, as regards locality, for supplying the accommodation required, as well as accommodation for wealthy patients; and as has been frequently pointed out in previous Reports, in receiving private patients at very low rates of board, they perform a specially charitable and useful work, of a kind which is in accordance with the intentions of their founders. Most of these institutions receive a limited number of patients whose friends are able to contribute such a sum as £25 a year, and in these cases the asylums afford, from the funds at their disposal, advantages which it would be impossible to obtain without their aid. But in the great majority of such cases, and in many cases where patients are able to pay considerably more than £25 a year, they could not get admission to certain of the Royal Asylums, except on the footing of paupers; and in the case of some

Asylum
Accommoda-
tion for Private
Patients.

of these asylums, it would be difficult to obtain admission as a private patient at a rate almost twice as high as that named.

We have given full recognition to the degree to which the Managers and Directors of most Royal Asylums have endeavoured to meet the wants of private patients in more or less straitened circumstances, and we observe with pleasure that they are becoming year by year more alive to the supreme importance of the duty devolving upon the Royal Asylums to provide for this class of patients—a duty which these asylums alone have the full power, under the existing law, to assume. But we think it necessary to repeat the statement made in previous reports, that they cannot be regarded as having done all that is desirable until all patients for whom rates of board of not more than £25 a year can be paid are provided for in these institutions as private patients.

Expenditure
for Pauper
Lunatics.

X. EXPENDITURE FOR PAUPER LUNATICS.

Increase of
Expenditure.

The parochial expenditure for each county, on account of pauper lunatics, is given in Table XXIII. (Appendix A), for the year ending 14th May 1895. From this Table it appears that, for the maintenance of 13,772 pauper lunatics, who were under care in asylums, lunatic wards of poorhouses, and private dwellings, and for other expenses connected with them, a total sum of £267,339 was paid; of which £197,994 was for maintenance in asylums, £15,842 was for maintenance in lunatic wards of poorhouses, £44,172 was for maintenance in private dwellings, and £9331 was for certification, transport, and other expenses. Of this expenditure £11,744 was repaid by relatives and others, and £115,407 was contributed from the Local Taxation Account, in terms of Section 22 of the Local Government (Scotland) Act, 1889, and of Section 2 of the Education and Local Taxation Account (Scotland) Act, 1892.

The following statement shows the expenditure for the maintenance of pauper lunatics for each period of five years, beginning with 1859–1863 and ending with 1890–1894, extracted from Table XXIV., and also the average number * of patients relieved in each period :—

Years.	Asylums including Institutions for Imbecile Children.		Lunatic Wards of Poorhouses with Restricted Licenses.		Private Dwellings.		Average Cost of Certificates Transport, &c.	Total.	
	Average No. of Patients relieved.	Average Expenditure.	Average No. of Patients relieved.	Average Expenditure.	Average No. of Patients relieved.	Average Expenditure.		Average No. of Patients relieved.	Average Expenditure.
1859–1863	2,587	61,735	836	14,695	1,706	14,763	4,031	5,129	95,224
1864–1868	3,007	73,416	979	19,241	1,547	15,157	4,400	5,533	112,214
1869–1873	4,200	105,018	613	10,952	1,474	16,345	4,806	6,287	137,121
1874–1879	5,127	138,278	616	12,790	1,401	17,787	4,809	7,144	173,664
1880–1884	6,220	164,001	699	13,793	1,599	22,554	6,188	8,513	206,536
1885–1889	6,572	169,720	829	15,835	2,125	32,574	6,654	9,527	224,783
1890–1894	7,355	184,564	869	16,558	2,497	40,007	8,193	10,721	249,322

* The average number of patients relieved is the number of patients who received relief for a whole year, that is, it is arrived at by taking the total number of days on which relief was given for each year and dividing that number by 365.

The materials do not exist for giving the expenditure in 1858 under the heads of this statement; but there are many reasons which would render the figures for that year, if they could be given, of little value for purposes of comparison. This remark applies also to the results shown by the first three quinquennials embraced in the statement, as compared with those shown by the four last. In the first quinquennial no District Asylum had come into full operation, and it was not until the fourth quinquennial had come to a close that all the District Asylums now in existence had been erected. One of the main objects of the legislation of 1857—the provision of sufficient accommodation for pauper lunatics throughout the country—did not take full effect until the quinquennial 1874–79 had been completed, and if no increased expenditure had occurred up to that time, it would have shown either that increased accommodation was not needed or that the object aimed at by the Lunacy Act of 1857 had been carried out in such a way as to fail in its intention. The increase shown up to the quinquennial 1874–79 is therefore a natural outcome of the legislation of 1857, and a proof of the necessity for it and of its success. Comparing the results of the quinquennial 1874–79 with the last for which we have statistics, it appears from the statement that the expenditure on patients in Asylums increased from £138,278 to £184,564, or 33 per cent.; in the Lunatic Wards of Poorhouses from £12,790 to £16,558, or 29 per cent.; in Private Dwellings from £17,787 to £40,007, or 125 per cent.; and that the whole expenditure increased from £173,664 to £249,322, or 44 per cent.

Expenditure
for Pauper
Lunatics.
—
Increase of
Expenditure.

It will be seen, however, from the following statement of the annual expenditure per patient that the increased total expenditure from the quinquennial 1874–1879 onwards is due to an increase of numbers, and not to a larger expenditure on each patient:—

Fall of Ex-
penditure
per head.

	Average Annual Expenditure per patient.			
	In Asylums in- cluding Institutions for Imbecile Children.	In Lunatic Wards of Poorhouses with Restricted Licenses.	In Private Dwellings.	Total.
1859–1863	£ s. d. 23 17 3	£ s. d. 17 11 7	£ s. d. 8 13 1	£ s. d. 18 11 6
1864–1868	24 8 4	19 13 1	9 15 11	20 6 1
1869–1873	25 0 1	17 17 4	11 1 9	21 16 6
1874–1879	26 19 5	20 15 3	12 18 11	24 6 5
1880–1884	26 7 4	19 14 8	14 2 1	24 5 5
1885–1889	25 16 6	19 1 0	15 6 7	23 12 5
1890–1894	25 1 10	19 1 1	16 0 5	23 5 3

It appears from this statement that there was a gradual rise of cost per patient in asylums in the three earliest quinquennials; that in the fourth quinquennial, 1874–1879, the maximum cost per patient was reached; and that the cost per patient in the three succeeding quinquennials shows a gradual fall. With regard to the rise in the earlier quinquennials, it must be kept in view that District Asylums, as has already been said, had not then fully come

Expenditure
for Pauper
Lunatics.

Fall of Ex-
penditure per
head.

into existence, and that most of the patients recognised as requiring asylum care were provided for in the Royal Asylums. These patients were maintained in most instances at rates which were insufficient to cover the cost of their lodging and maintenance, and the deficiency must have been met out of the profits derived from the reception of private patients, which profits must, therefore, so far, have been spent practically in the relief of the poor-rates. This came soon to be recognised by the managers of the Royal Asylums, with the result that the rates were, from time to time, raised until they met, or more nearly met, the cost of keeping the patients. This rise in the rates of Royal Asylums did not come fully into force until after a time when the average expenditure per patient had begun to fall, that is, until after the maximum cost per patient in asylums had been reached in 1874-1879; so that other causes were no doubt at work which tended to raise the rates in the earlier quinquennials, such as a greater liberality of view in regard to what is necessary for the proper care and treatment of lunatics; the increased expenses connected with the opening years of the District Asylums, which were coming successively into operation; and also, especially in the years during which the expenditure per patient reached its maximum, to the increased price, as compared with earlier years, of articles of food and clothing. Since the period 1874-1879, the continuous fall which is shown by the Statement is due, as will be seen afterwards when the expenditure under the various heads in District Asylums is dealt with, to a fall of prices, and chiefly of the price of food. The figures in the second column showing the expenditure per patient in the Lunatic Wards of Poorhouses are based, more or less, upon estimates, by the authorities to which the Poorhouses belong, and cannot be so accurately ascertained as those referring to asylums; but many of the remarks made in regard to the figures referring to asylums apply to them also, and the course of expenditure shown in regard to these institutions follows generally the course of expenditure in asylums. The column, however, dealing with the expenditure on pauper lunatics in private dwellings shows results which differ from those shown by the columns referring to institutions. The expenditure per head on pauper lunatics in private dwellings, in the period 1890-1894, is almost double the expenditure for 1859-1863, and a progressive expenditure is shown in each intervening period. This increase is due in part to increased allowances to the guardians of out-door patients, both of those related to the patients and of those unrelated to them; but the greater part of it must be attributed to the fact that, in the earlier quinquennials, the majority of patients were boarded with related guardians, who in most cases only received a contribution towards the cost of the patient's maintenance. The policy of boarding patients with unrelated guardians, gradually adopted by the larger parishes brought about a change. The patients boarded with unrelated guardians soon outnumbered those under the charge of their relatives, and the preponderance in number of the former class over the latter has gone on increasing up to the present time. Unrelated guardians have naturally to be remunerated at a rate which not only covers the entire cost of the patient's maintenance but

leaves a margin of profit, and the result leads necessarily to a large increase of the expenditure per head in the case of patients provided for in private dwellings. Both the number of patients of this class and the expenditure per head is, however, small as compared with the number and the expenditure in institutions, and the result does not therefore greatly affect the figures in the last column dealing with the expenditure per head on pauper lunatics generally. These figures follow, it will be seen, the course shown by the figures referring to the expenditure per head on patients in institutions. Leaving out of consideration the complicated questions connected with increased expenditure which is due to the growth of the number on the roll of pauper lunatics, which growth has been fully dealt with in our former Reports, and is only incidentally touched upon here, it will be seen that these figures afford evidence that, on the whole, the insane poor are being provided for by those intrusted with their care with a due regard to economy.

Expenditure
for Pauper
Lunatics.

—
Fall of Ex-
penditure per
head.

A mere comparison of the figures showing the expenditure on pauper lunatics in earlier and later years is apt to convey a false impression, unless the special circumstances are kept in view under which the increased expenditure took place; and as the knowledge of the fact that the expenditure in connection with pauper lunacy has greatly increased is often accompanied by an erroneous belief that the cost per head of maintaining the insane poor is also increasing, it may be useful to give the following summary of the facts to which attention has been drawn. These are :—

Summary of
Facts as to
Increase of
Expenditure,
and Fall in
Cost per head.

(1) That the increase of the gross expenditure for the first fifteen or twenty years for which we possess statistics, in so far as it is the result of increased numbers of the insane poor maintained in asylums, was an inevitable outcome of what the Lunacy Act of 1857 was intended to accomplish, that is, the provision of sufficient asylum accommodation.

(2) That the rise in the cost per patient in institutions during that period was due to causes easily understood, and chiefly to the fact that Royal Asylums, which in the earlier years maintained pauper lunatics at rates involving loss, raised the rates from time to time.

(3) That at a period about fifteen to twenty years ago, the expenditure per head on pauper lunatics reached its maximum; and that, from that time onwards, although the expenditure per head on patients in private dwellings has been rising, the expenditure per head on their maintenance in institutions, and on their maintenance generally, has been gradually falling.

It is necessary to bear in mind that the expenditure, as given in Table XXIV., refers only to the cost of maintenance which is born in the first instance by the poor-rate, and contributed to by the State and the relatives of paupers. It does not take into account the interest on the greater part of the money which has been laid out in the purchase of land, and the erection of the institutions in which pauper lunatics are treated. These expenses are defrayed out of special assessments on all Lunacy Districts in which District Asylums have been provided.* In the case of

Cost of Land
and Buildings
only slightly
represented in
Expenditure
Table.

* See remarks on Table XXVIII., page 11. **1 x x**

**Expenditure
for Pauper
Lunatics.**

patients accommodated in Royal or Chartered Asylums, or in Parochial Asylums not belonging to the parishes to which the patients are chargeable, an addition to the charge for maintenance is made in most cases, in consideration of the accommodation having been provided by the institution, but this addition does not bear any definite relation to the actual cost of the accommodation.

**Repayments
by relatives.**

The contributions towards the maintenance of pauper lunatics made by relatives and obtained from other private sources are shewn in the second last column of Table XXIII. They have increased from £1877 in 1859 to £11,743 in 1894-95.

**Contributions
from State
Funds.**

The annual Parliamentary Grant in aid of the cost of maintenance of pauper lunatics, first given for the year 1874-75, ceased in 1889, and its place was taken by a fixed contribution towards the cost of maintenance of pauper lunatics of £90,500, in terms of Section 22 of the Local Government (Scotland) Act, 1889. This contribution towards the cost to parishes of maintaining pauper lunatics was supplemented by a further fixed contribution of £25,000 under Section 2 of the Education and Local Taxation Account (Scotland) Act, 1892.

These contributions are distributed among Parochial Boards by the Secretary for Scotland, as nearly as may be in the manner in which the annual Parliamentary Grant was distributed. The State contribution for the year 1894-95 was equal to about 4s. 4d. per week for each patient for whose maintenance a sum was paid equal to or exceeding 8s. a week. No claim is allowable in respect of any excess of expenditure over 8s. a week. Expenditure under that sum shares in the contribution in proportion to its amount.

The contributions from State funds towards the maintenance of pauper lunatics, for each of the twenty-one years in which such contributions have been made, are shown in the following statement:—

Contributions from State Funds towards Maintenance of Pauper Lunatics.

For the year ending			For the year ending		
14th May 1875,	£59,483		14th May 1886,		87,164
" 1876,	62,637		" 1887,		88,258
" 1877,	65,470		" 1888,		89,072
" 1878,	68,533		" 1889,		91,335
" 1879,	71,272		" 1890,		90,474
" 1880,	73,833		" 1891,		90,450
" 1881,	76,856		" 1892,		115,574
" 1882,	79,711		" 1893,		115,717
" 1883,	81,495		" 1894,		115,789
" 1884,	83,089		" 1895,		115,407
" 1885,	85,111				

**Daily Cost of
Maintenance in
Establish-
ments.**

The average daily cost of maintenance of pauper patients in the different classes of establishments for the ten years 1885-86 to 1894-95 is shown in Table XXV. (Appendix A). The general average rate is shown by the Table to be 1s. 3¼d., which is the same as that for the previous seven years.

**Daily Cost of
each Mode of
provision for
Pauper
Lunatics.**

Table XXVI. (Appendix A) shows, from returns furnished by inspectors of poor, the average daily rate of maintenance for each mode of providing for pauper lunatics in each county during

the year ending 14th May 1895, and the proportion in which each mode is adopted in each county. It appears from this Table that the daily cost of maintaining pauper lunatics in asylums; in licensed wards of poorhouses, and in private dwellings, varies considerably in the different counties.

As regards asylums, the lowest average daily cost per head for a county is a 1s. 1½d. and the highest is 1s. 8½d., which, calculated for the year, would be £20, 3s. 0½d. and £31, 3s. 6½d.

As regards the licensed wards of poorhouses, the lowest daily cost for a county is 9d. and the highest is 1s. 4¾d., or £13, 13s. 9d. and £25, 9s. 5¾d. per annum.

As regards private dwellings, the lowest average daily cost for a county is 6½d. and the highest is 1s. 2½d., or £9, 17s. 8½d. and £22, 1s. 0½d. per annum.

Table XXVII. (Appendix A) shows the present rates of board for pauper lunatics in each of the various classes of establishments and the minimum rates for private patients in Royal and District Asylums.

Expenditure for Pauper Lunatics.

Daily cost of each mode of provision for Pauper Lunatics.

Rates of Board in Establishments.

From this Table it appears that the minimum rates of board at which pauper patients are, received in the Royal or Chartered Asylums range from £24 per annum, which is the rate in the Crichton Royal Institution, to £32, which is the rate in the Aberdeen Royal Asylum. In District Asylums the rates for patients belonging to the respective districts range from £19, 18s. 8d. in the Argyll Asylum to £31, 4s. in the Lanark Asylum. The latter may, however, be regarded as a temporary rate in the case of an Asylum newly opened. In Parochial Asylums the estimated cost for the pauper lunatics of the parishes to which these establishments severally belong, varies from £18, 4s., which is the estimated cost in the Glasgow City Parochial Asylum, a small establishment for female patients only, to £27, 6s., which is the estimated cost in the Barony Parochial Asylum.

The rates in District Asylums may be regarded as showing in these establishments the actual cost of maintenance as distinguished from the cost of lodging. It is proper, therefore, when comparing these rates with those in Royal and Parochial Asylums, to keep in view that the expense of erecting and fitting up District Asylums is defrayed out of county assessment; whereas, in the case of Royal Asylums, it is defrayed either out of endowments, or out of the profits derived from keeping private patients, or out of the board charged for paupers; and in the case of Parochial Asylums, *i.e.*, lunatic wards of poorhouses with unrestricted licences, it is defrayed out of the poor-rate, and is now taken more or less into account in the estimated cost given in the Table. In the rates given as representing the cost in the lunatic wards of poorhouses, which range from £15, 12s. in the Buchan Poorhouse to £26, 12s. 7d. in the Edinburgh Poorhouse, the cost of the Buildings is also to some extent taken into account.

The great differences in the estimated cost of patients, shown in some instances between one establishment of the same class and another, both in the case of Parochial Asylums and Lunatics Wards of Poorhouses, are not accounted for by differences in these establishments in regard to dietary or accommodation.

Expenditure
for Pauper
Lunatics.

Cost of Pro-
viding District
Asylum Ac-
commodation.

Table XXVIII. shows the expenditure by District Boards of Lunacy during the financial year 1894-95, on lands, buildings, and furnishings of District Asylums, and other expenses connected therewith. It refers entirely to expenditure on pauper lunatics paid out of county assessments, as distinguished from the expenditure which is met by poor-rates levied on parishes.

Column 9 of the Table shows that the net outlay on District Asylums during the year 1894-95 for land and for the erection, repair, and furnishing of buildings, &c., was £178,008. A considerable proportion of this amount is owing to the fact that three large asylums were, during the financial year dealt with, in course of erection in Lanarkshire.

The second last column of the table shows that the amount of money, borrowed by District Lunacy Boards on the security of assessments, to provide land and buildings, and remaining unpaid at 15th May 1895, was £553,764; and the last column shows that the total assessments on lunacy districts to provide the interest on sums borrowed, to repay instalments of principal, and to repair and maintain buildings, &c., amounted for the year ending 15th May 1895, to £49,344.

Cost of
Maintenance
of Patients
in District
Asylums.

Table XXIX. shows in detail the expenditure on the maintenance and management of pauper lunatics in each District Asylum during the financial year 1894-95, and the net cost at which the patients of each asylum are maintained. The average cost of maintenance and management per patient for the year 1894-95 is £24, 0s. 11d., and after a deduction of farm profits, the average net cost is £23, 1s. 11d.,* which shows an increase in the net cost over the previous year of 10s. 11d. per patient. The expenditure, under

No.	YEAR 1894-95		Food.	Tobacco (per male patient).	Wines, Spirits, and Malt Liquors.	Clothing, Boots, and Shoes.	Salaries and Wages.	All other Expenses.	Total Mainten- ance Ex- penses, without deduction of profit on Farm &c.†
	DISTRICT ASYLUMS.								
1	Argyll,	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
2	Ayr,	9 8 9	0 9 2	0 0 9	1 7 7	6 7 4	4 12 11	22 2 2	
3	Banff,	9 16 4	0 12 7	0 3 6	1 16 10	5 17 9	5 14 6	23 14 8	
4	Elgin,	9 9 4	0 10 8	0 6 1	1 19 10	4 18 7	5 4 9	22 3 10	
5	Fife,	9 14 10	0 14 9	0 5 3	1 7 4	4 18 7	5 4 8	21 16 10	
6	Haddington,	9 11 9	0 9 8	0 3 4	1 1 8	5 6 0	6 6 4	22 13 6	
7	Inverness,	8 16 5	0 9 0	0 6 11	1 4 11	7 5 3	4 16 7	22 14 4	
8	Kirklands,	8 18 11	0 6 7	0 2 4	2 0 10	5 12 8	6 6 3	23 4 5	
9	Middlethian,	9 3 9	0 7 3	0 4 0	1 15 0	8 4 4	4 12 6	24 3 11	
10	Perth,	10 1 7	0 8 10	0 8 1	1 17 6	7 15 11	5 15 4	26 2 7	
11	Roxburgh,	11 4 7	0 9 5	0 8 11	2 10 10	6 8 2	5 6 4	26 3 7	
12	Stirling,	10 9 11	0 9 3	0 4 5	1 19 4	7 17 10	5 19 6	26 15 3	
		9 14 0	0 9 10	0 5 11	1 16 8	6 7 6	7 0 3	25 9 5	
	Average.	9 14 6	0 9 6	0 4 6	1 15 1	6 6 5	5 15 8	24 0 11	

* These calculations, and those in the following Table, are made upon the average numbers of patients actually resident.

† The difference between the sum shown in the last column, and that shown by the addition of the figures in the columns preceding it, arises from the fact that the 'Total Maintenance Expenses' are calculated upon the total number of patients resident, while in the case of the column headed 'Tobacco,' the cost is calculated on the number of male patients only.

such heads of these Tables as embrace articles produced by asylum farms and gardens, is liable to be more or less affected by varying estimates of value, but as an over or under estimate of the value of farm produce would only have the ultimate effect of increasing or diminishing the apparent profit on the farm account, they cannot affect the 'net maintenance expenses,' which are stated under deduction of farm profits. The foregoing statement shows the total expenses per patient, as shown by the Table, in all District Asylums for the year 1894-95, and the expenses under the six heads specified.

This statement shows that in the year 1894-95 the highest expenditure under the head of Food was £11, 4s. 7d. per patient, in the Perth Asylum; and the lowest £8, 16s. 5d., in Haddington Asylum, which is 18s. 1d. below the average of all District Asylums.

The financial year ending May 1895 completes the twelfth year since we introduced a uniform method of accounting by District Lunacy Boards, and we think it may be useful to give the following statement, under the same heads as those given in the previous statement, of the expenditure in District Asylums during each of the twelve years for which the information is obtainable:—

Expenditure for Pauper Lunatics.

Cost of Maintenance of Patients in District Asylums.

Expenditure on Maintenance of Patients in District Asylums during past eleven years.

YEARS.	Food.	Tobacco (per Male patient).	Wines, Spirits, and Malt Liquors.	Clothing. Boots, and Shoes.	Salaries and Wages.	All other Expenses.	Total Maintenance Expenses, without de- duction of Profit on Farm, &c.*
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1883-84	11 15 0	0 9 3	0 5 7	1 14 5	6 4 0	5 1 4	25 4 8
1884-85	11 12 0	0 9 8	0 5 2	2 0 4	6 8 0	5 5 8	25 15 9
1885-86	11 6 0	0 9 8	0 5 4	1 17 2	6 9 0	5 14 10	25 17 1
1886-87	10 14 4	0 10 0	0 5 6	1 17 0	6 12 0	5 10 6	25 4 3
1887-88	10 4 6	0 9 3	0 5 9	1 17 2	6 9 2	5 9 2	24 10 3
1888-89	10 4 3	0 9 3	0 6 9	1 19 3	6 9 4	5 11 9	24 16 0
1889-90	10 9 7	0 9 3	0 6 5	1 19 11	6 9 8	6 1 2	25 11 4
1890-91	10 8 7	0 9 3	0 6 2	1 16 9	6 5 0	5 14 2	24 15 2
1891-92	10 11 1	0 9 5	0 6 3	1 17 2	6 4 4	5 15 4	24 18 11
1892-93	10 7 1	0 9 7	0 5 4	1 15 8	6 4 0	5 19 5	24 16 3
1893-94	9 16 10	0 9 1	0 4 2	1 12 5	6 3 0	5 10 10	23 11 9
1894-95	9 14 6	0 9 6	0 4 6	1 15 1	6 6 5	5 15 8	24 0 11

The expenditure naturally fluctuates somewhat from year to year, but on the whole it will be seen that the gross expenditure has been falling, the total expenses in the first year dealt with being £25, 4s. 8d. per patient, and in the last £24, 0s. 11d. A decrease is shown under most of the heads of the statement, but the main decrease occurs under the head 'Food,' and must be chiefly attributed to a general fall in the price of provisions. The figures, generally, afford a satisfactory proof that District Lunacy Boards are showing a due regard to economy in their arrangements for the maintenance of patients in the asylums under their arrangement.

* The difference between the sum shown in the last column, and that shown by the addition of the figures in the columns preceding it, arises from the fact that the 'Total Maintenance Expenses' are calculated upon the total number of patients resident, while in the case of the column headed 'Tobacco,' the cost is calculated on the number of male patients only.

Lunatics under
Judicial
Factors.

All patients resident in Scotland whose estates are under the management of Judicial Factors were visited by our officers during the year, except some whose position and circumstances were otherwise satisfactorily known, and in whose cases visitation was thought undesirable.

The Statistics
of Lunacy from
1858 to 1896.

XIV. THE STATISTICS OF LUNACY FROM 1858 TO 1896.

In Table I. of Appendix A, we give the number of private and pauper lunatics, of whom we had official cognisance, exclusive of the inmates of the Lunatic Department of H.M. General Prison, and of Training Schools for Imbecile Children, at 1st January 1858, and at 1st January of each year up to the present time, distinguishing the numbers of each category accommodated in establishments and in private dwellings, and also distinguishing between the sexes. The number of private and pauper patients, and the modes of disposing of them, are shown by this Table to have undergone the following changes:—

	Increase since 1858.
1. Private Patients:—	
<i>a.</i> Resident in Establishments, . . .	923
<i>b.</i> Resident in Private Dwellings, . . .	91
2. Pauper Patients:—	
<i>a.</i> Resident in Establishments, . . .	6004
<i>b.</i> Resident in Private Dwellings, . . .	916
Total, . . .	7934
<i>Increase of number in Training Schools, and the Lunatic Department of the General Prison,</i>	335
<i>Total Increase,</i>	8269

Increase of
Number since
1858.

It will be seen from Table II. of Appendix A, that from 1st January 1858, when we entered on our functions, to 1st January 1896, the total number of lunatics officially known to the Board, including the inmates of the Lunatic Department of H.M. General Prison, and also the inmates of Training Schools for Imbecile Children, has increased from 5824 to 14093, showing an increase of 8269.

Difference
between the
Mode of
Distribution at
1st January
1858 and at 1st
January 1896.

Table II. further shows the mode in which lunatics of all classes were provided for on the 1st of January 1858, and the mode in which they have been provided for on the 1st of January of each year since that time. The following statement shows the difference between the modes of distribution at the beginning and at the end of the whole period:—

	At 1st January 1858.	At 1st January 1896.	Increase since 1858.	Decrease since 1858.	Net Increase.
In Royal and District Asylums, .	2380	8293	5913	...	...
„ Private Asylums,	745	144	...	601	...
„ Parochial Asylums and Lunatic Wards of Poorhouses, . . .	840	2455	1615	...	...
„ Private Dwellings,	1804	2811	1007	...	...
„ The Lunatic Department of H.M. General Prison, . . .	26	57	31	...	...
Training Schools,	29	333	304	...	...
Total Increase or Decrease,	5824	14,093	8870	601	8269

Quinquennial
Retrospect.

These figures show a decrease in private asylums, but an increase in every other kind of establishment, and also in private dwellings. Deducting the decrease of 601 in private asylums from the increase of 8870 shown under other heads, the figures give since 1858 a net increase of 8269 in the number of lunatics under the jurisdiction of the Board, or 142 per cent. The increase of the population during the same period has been only 38 per cent.

Table III. of Appendix A, shows that at 1st January 1896 the proportion of private lunatics in establishments was 46 per 100,000 of population, which is one more than last year.

Proportion of
Lunatics to
Population.

The proportion of pauper lunatics in establishments per 100,000 of population was at the beginning of this year 216 which is 2 above last year, and is the highest figure yet recorded.

The proportion of pauper lunatics in private dwellings per 100,000 of population was at the beginning of this year 65, which is the same as last year.

The proportion of all pauper lunatics per 100,000 of population shows an almost steady increase since 1858, and at the beginning of this year attained its highest figure of 281, as against the next highest 279 which was attained last year.

We regret to have to announce the death, since the date of this Report, of Dr Robert Lawson, Deputy-Commissioner, who proved himself, during the seventeen years in which he held office, a most able and efficient public servant.

Death of
Dr Lawson.

We have the honour to be,

MY LORD,

Your most obedient humble Servants,

Wm. Gibson Carmichael, Chairman
John Cowan
John Heggs
John Sibbald
John Trevelyan

Wd. Bruce
 Secretary.

CONTENTS OF APPENDICES.

APPENDIX A.

STATISTICAL HISTORY OF LUNATICS FROM 1858 TO 1896.

	PAGE
I. Table showing the Number of Lunatics in Establishments and in Private Dwellings, classifying them as Private and Pauper Patients, and distinguishing between the Sexes, on 1st January of each year, 1858 to 1896, .	1
II. Table showing the different Modes in which Lunatics have been provided for on 1st January of each year from 1858 to 1896,	2
III. Table showing the Proportions of Private Lunatics and of Pauper Lunatics in Asylums and in Private Dwellings, per 100,000 of the population ; the Proportion of Registered Paupers, per 100,000 of the population ; and the Proportion of Pauper Lunatics, per 100,000 of Registered Paupers for each year, from 1858 to 1896, .	3
IV. Table showing the Total Number of Private and Pauper Lunatics on the Register at 1st January of each year, from 1874 to 1896, the Number placed each year on the Register from 1874 to 1895, the Number removed therefrom each year by Discharge or Death, and the Proportion of Deaths per cent. of the Average Number on the Register,	4
V. Table showing for each year, from 1874 to 1895, the Total Number of Private and Pauper Lunatics in Scotland registered during the year, who had never previously been registered as Lunatics, and the Proportion of such Lunatics per 100,000 of Population, .	5
VI. Table showing the Numbers of Private and Pauper Lunatics resident in Royal, District, Private, and Parochial Asylums, and in Lunatic Wards of Poor-houses, on 1st January of each year from 1858 to 1895 ; the Numbers thereinto Admitted, the Numbers	

	PAGE
therefrom Discharged Recovered and not Recovered ; the numbers transferred from one Establishment to another ; and the Numbers that Died therein in each of the said years,	6
VII. Table showing the Numbers of Admissions to Asylums and other Establishments, excluding Transfers from one Establishment to another, in each year from 1858 to 1895,	7
VIII. Table showing the Numbers of Discharges from Asylums and other Establishments, excluding transfers, and the Numbers of Deaths therein during each year from 1858 to 1895,	8
IX. Table showing the Results of Treatment in different classes of Establishments for each year from 1858 to 1895,	9
X (a). Table showing the Average Annual Mortality per cent., and the causes of Death, in Royal and District Asylums, on the Average Numbers Resident during the thirty-seven years 1858 to 1895,	13
X (b). Table showing the Annual Number of Deaths and Classification of the Causes of Death of Patients who Died in Asylums and other Establishments for each year from 1870 to 1895,	15
XI. Table showing the Statistics of Pauper Lunatics in Private Dwellings for each year from 1858 to 1895,	17
XII. Table showing the Number of Pauper Lunatics belong- ing to each County, who were placed on the Register, and sent to Asylums or left in Private Dwellings in each year from 1860 to 1895,	19
XIII. Table showing the Number of Pauper Lunatics belong- ing to each County, who were transferred from Private Dwellings to Establishments, or from Establishments to Private Dwellings, in each year from 1860 to 1895,	21
XIV. Table showing the Number of Pauper Lunatics charge- able to each County, who were resident in Establish- ments and in Private Dwellings respectively, on 1st January of each year from 1861 to 1896,	23

STATISTICS OF LUNATICS FROM 1ST JANUARY 1895 TO 1ST JANUARY 1896.

XV. Table showing the Number of Private and Pauper Lunatics of each Sex, in each Royal and District Asylum, Private Asylum, Parochial Asylum, and

Licensed Poorhouse, on 1st January 1896, and the Number of Pauper Lunatics from each County in each Public Asylum, Private Asylum, Parochial Asylum, or Licensed Poorhouse,	25
XVI. Table showing the Number of Pauper Lunatics of each Sex chargeable to each County on 1st January 1896, and the manner of their disposal,	27
XVII. Table showing the manner in which the Pauper Lunatics chargeable to each County, placed on the Register during 1895, were disposed of, and the changes that have taken place during the year in the disposal of those on the Register on 1st January of that year,	28
XVIII. Table showing the Proportions for each County, per 100,000 of population, of Pauper Lunatics annually placed on the Register in the years 1886 to 1895 ; also of those at 1st January 1896 in Asylums, Lunatic Wards of Poorhouses, and in Private Dwellings, and the proportions of Registered Paupers of all classes,	29
XIX. Table showing the Number of Orders granted by the Sheriffs for Admission of Lunatics into any Public, Private, or District Asylum or House, stating the Asylum or House to which such Order was sent, dur- ing the year ending 31st December 1895,	30
XX. Table showing the Number of Licences granted by the General Board of Lunacy for Scotland, for the Continu- ance, Establishment, or Renewal of Charitable In- stitutions, Private Asylums, and Lunatic Wards of Poorhouses, and the Transfer of any such Licence from any one Establishment to another, during the year ending 31st December 1895,	32
XXI. Table showing the Average Number of Patients resident, and the results of Treatment in each Asylum or other Establishment, for the year 1895,	33
XXII. Table showing the Classification of the Causes of Death of Patients who died in Asylums and other Establish- ments in the year 1895,	36
STATISTICS RELATING TO EXPENDITURE FOR LUNATICS.	
XXIII. Table showing the Expenditure for each County on account of Pauper Lunatics during the Year ending 14th May 1895,	39

	PAGE
XXIV. Table showing the Expenditure by Parochial Boards on account of Pauper Lunatics for each year from 1859 to 1894-95,	40
XXV. Table showing the Average Daily Cost of Maintenance of Pauper Lunatics in the different classes of Establishments, and in Private Dwellings, in each of the ten years 1885-86 to 1894-95,	40
XXVI. Table showing the Daily Rate of Maintenance for each mode of providing for Pauper Lunatics in each County during the year ended 14th May 1895,	41
XXVII. Table showing the present Rates of Board per Annum in Royal, District, and Parochial Asylums, and in Lunatic Wards of Poorhouses,	42
XXVIII. and XXIX. Tables showing the Expenditure by District Boards of Lunacy in Providing, Building, Repairing, and Fitting up, and Furnishing District Asylums, and on the Maintenance and Management of Pauper Lunatics in such Asylums, during the Financial year 1894-95,	43-45
XXX. Table showing the Quantity per Inmate of the various Articles of Dietary, and of Tobacco and Fuel, supplied to each District Asylum during the Financial year 1894-95, and the Price of each Article supplied,	47
XXXI. Table showing the Quantities and Estimated Values of Articles supplied to District Asylums from Asylum Farms and Gardens, during the Financial year 1894-95, and Prices at which the Produce supplied has been estimated,	49
XXXII. Table showing the Acreage of Farms attached to District Asylums, Receipts and Expenses of such Farms and of Gardens during the Financial year 1894-95, and Profits shown on the Year's Transactions,	50

APPENDIX B.

Entries made by the Commissioners in the Patients' Books of Public, District, Private, and Parochial Asylums, Lunatic Wards of Poorhouses, Imbecile Training Schools, and the Lunatic Department of H.M. General Prison, Perth, on the occasion of their Statutory Visits to these Establishments during the year 1895,	51
---	----

	PAGE
Royal and District Asylums—	
Aberdeen Royal Asylum,	51
Argyll District Asylum,	53
Ayr District Asylum,	55
Banff District Asylum,	57
Crichton Royal Institution, Dumfries,	58
Dundee Royal Asylum,	62
Edinburgh Royal Asylum,	64
Elgin District Asylum,	67
Fife and Kinross District Asylum,	68
Glasgow Royal Asylum,	70
Haddington District Asylum,	72
Inverness District Asylum,	74
Kirklands Asylum,	76
Lanark District Asylum,	77
Midlothian District Asylum,	82
Montrose Royal Asylum,	84
Murray's Royal Asylum, Perth,	86
Perth District Asylum,	87
Roxburgh District Asylum,	90
Stirling District Asylum,	92
Private Asylums—	
Mavisbank Asylum,	94
Mollendo House Asylum,	95
Saughton Hall Asylum,	95
Westermains Asylum,	96
Whitehouse Asylum,	97
Parochial Asylums—	
Abbey Parochial Asylum, Craw Road,	97
Barony Parochial Asylum,	98
Glasgow Parochial Asylum,	101
Govan Parochial Asylum,	101
Greenock Parochial Asylum,	103
Paisley Parochial Asylum, Riccartbar,	104
Lunatic Wards of Poorhouses—	
Aberdeen East Poorhouse,	106
Buchan Combination Poorhouse,	106
Cuninghame Combination Poorhouse,	107
Dumbarton Combination Poorhouse,	108
Dundee East Poorhouse,	108
Dundee West Poorhouse,	109
Edinburgh City Poorhouse,	110

	PAGE
Hamilton Combination Poorhouse,	111
Inveresk Combination Poorhouse,	111
Kincardine Combination Poorhouse,	112
Linlithgow Poorhouse,	113
Old Machar (Aberdeen West) Poorhouse,	113
Old Monkland Poorhouse,	114
Perth Poorhouse,	115
Wigtown Combination Poorhouse,	115
Training Institutions for Imbeciles—	
Baldovan,	116
Larbert,	117
Lunatic Department of H.M. General Prison at Perth,	119

APPENDIX C.

General Reports on Visitation of Patients in Private Dwellings:—

By Dr J. F. Sutherland,	120
By Dr C. Macpherson,	132
By Dr J. Batty Tuke, junior,	135

APPENDIX D.

Instructions for the Guidance of Inspectors of the Poor in the Disposal and Management of Pauper Lunatics,	138
--	-----

APPENDIX E.

Circular issued to Superintendents of Asylums regarding the record of Restraint and Seclusion, and calling for Quarterly Return,	156
--	-----

APPENDIX F.

Circular Letter to Inspectors of Poor Restricting the Growth of the Number of Patients in Private Dwellings in certain Parishes of Fifeshire,	157
---	-----

APPENDIX A.—TABLE I.*

The Number of Lunatics in Establishments and in Private Dwellings, classifying as Private and Pauper Patients, and distinguishing between the Sexes, on 1st January of each Year from 1858 to 1896.

At 1st January.	NUMBER OF PRIVATE LUNATICS.							NUMBER OF PAUPER LUNATICS.						TOTALS.		
	In Asylums.			As Patients in Private Dwellings under Sheriff's Order or Sanction of Board.				In Asylums and Lunatic Wards of Poorhouses.			In Private Dwellings.			Private	Pauper.	Total.
	M.	F.	T.	M.	F.	T.		M.	F.	T.	M.	F.	T.			
1858	506	506	1012	10	10	20		1402	1551	2953	810	974	1784	1032	4737	5769.
1859	503	508	1011	11	13	24		1447	1656	3103	838	1039	1877	1035	4980	6015
1860	486	485	971	8	13	21		1567	1812	3379	828	1019	1847	992	5226	6218
Average of the 5 Years, 1861-65.	502	522	1024	8	13	21		1678	1939	3617	746	945	1691	1045	5308	6353
Average of the 5 Years, 1866-70.	558	581	1139	14	18	32		2014	2269	4283	666	855	1521	1171	5804	6975
Average of the 5 Years, 1871-75.	603	649	1252	33	38	71		2356	2654	5010	625	829	1454	1323	6464	7787
1876	629	657	1286	48	63	111		2583	2948	5531	568	813	1381	1397	6912	8309
1877	660	697	1357	46	58	104		2697	3076	5773	577	840	1417	1461	7190	8651
1878	667	686	1353	46	62	108		2813	3227	6040	552	833	1385	1461	7425	8886
1879	657	701	1358	43	67	110		2960	3332	6292	560	838	1398	1468	7690	9158
1880	725	662	1387	42	66	108		3055	3419	6474	567	848	1415	1495	7889	9384
Average of the 5 Years, 1881	667	681	1348	45	63	108		2822	3200	6022	565	834	1399	1456	7421	8878
1882	701	692	1411	41	72	113		3167	3555	6722	604	912	1516	1524	8238	9762
1883	701	703	1404	45	71	116		3343	3664	7007	611	957	1568	1520	8575	10095
1884	706	708	1414	45	75	120		3325	3692	7017	664	1029	1693	1534	8710	10244
1885	710	731	1441	48	80	128		3352	3726	7078	720	1091	1811	1569	8889	10458
Average of the 5 Years, 1886	715	747	1462	52	78	130		3401	3773	7174	742	1119	1861	1592	9035	10627
1887	710	716	1426	46	75	121		3318	3682	7000	668	1022	1690	1548	8689	10237
1888	707	762	1469	44	76	120		3484	3764	7248	803	1255	2058	1589	9306	10895
1889	708	781	1489	45	85	130		3541	3725	7266	837	1303	2140	1619	9406	11025
1890	728	813	1541	44	88	132		3612	3774	7386	876	1394	2270	1673	9656	11329
Average of the 5 Years, 1891	759	877	1636	42	89	131		3721	3879	7600	894	1403	2297	1767	9897	11664
1892	773	864	1637	46	82	128		3789	3999	7788	975	1470	2445	1765	10233	11998
1893	735	819	1554	44	84	128		3629	3828	7457	877	1365	2222	1682	9700	11382
1894	771	908	1679	40	84	124		3884	4104	7988	993	1496	2489	1803	10477	12280
Average of the 5 Years, 1895	788	914	1702	42	83	125		3963	4244	8207	973	1462	2435	1827	10642	12469
1896	825	948	1773	37	78	115		3979	4339	8318	996	1523	2519	1888	10837	12725
1897	861	940	1801	40	68	108		4062	4414	8476	1013	1552	2565	1909	11041	12950
Average of the 5 Years, 1898	915	968	1883	37	76	113		4241	4575	8816	1073	1604	2677	1996	11493	13489
1899	832	936	1768	39	78	117		4026	4335	8361	1010	1527	2537	1885	10898	12783
1900	910	1025	1935	37	74	111		4282	4675	8957	1100	1600	2700	2046	11657	13703

* Inmates of Schools for Imbeciles and in the Lunatic Department of the General Prison are not included in this Table. Their numbers at 1st January of each year from 1858 to 1895 will be found in the Table following.

APPENDIX A.—TABLE II.

The different Modes in which Lunatics, both Private and Pauper, have been provided for on 1st January of each Year from 1858 to 1896.

YEARS.	In Royal and District Asylums.	In Private Asylums.	In Parochial Asylums, Lunatic Wards of Poor-houses with Unrestricted Licence.	In Lunatic Wards of Poorhouses with Restricted Licence.	In Private Dwellings.	Total Number of Registered Lunatics.	In Lunatic Department of General Prison.	In Training Schools.	General Total.
1858.....	2380	745	840		1804	5769	26	29	5824
1859.....	2496	821	797		1901	6015	29	28	6072
1860.....	2632	852	866		1868	6218	33	22	6273
Average of } 5 Years, 1861-1865.	2880	883	879		1712	6354	31	34	6419
Average of } 5 Years, 1866-1870.	3824	569	459	569	1553	6975	47	91	7113
Average of } 5 Years. 1871-1875.	4697	320	657	588	1525	7787	51	132	7971
1876.....	5158	189	861	609	1492	8309	54	146	8509
1877.....	5236	205	1038	651	1522	8652	57	153	8862
1878.....	5449	208	1092	644	1493	8886	55	156	9097
1879.....	5652	202	1139	657	1508	9158	57	171	9386
1880.....	5798	158	1229	676	1523	9384	61	179	9624
Average of } 5 Years.	5459	192	1072	647	1508	8878	57	161	9096
1881.....	5920	157	1342	714	1629	9762	55	195	10012
1882.....	6187	156	1350	718	1684	10095	62	198	10355
1883.....	6189	149	1377	716	1813	10244	63	203	10510
1884.....	6239	163	1398	719	1939	10458	53	228	10739
1885.....	6305	148	1435	748	1991	10627	53	238	10918
Average of } 5 Years.	6168	155	1380	723	1811	10237	57	212	10506
1886.....	6297	139	1445	836	2178	10895	62	230	11187
1887.....	6326	128	1444	857	2270	11025	56	228	11309
1888.....	6440	148	1460	879	2402	11329	52	228	11609
1889.....	6707	158	1493	878	2428	11664	57	233	11954
1890.....	6882	156	1511	876	2573	11998	58	246	12302
Average of } 5 Years.	6530	146	1471	865	2370	11382	57	233	11672
1891.....	7116	152	1517	882	2613	12280	57	258	12595
1892.....	7347	163	1524	875	2560	12469	57	273	12799
1893.....	7488	157	1570	876	2634	12725	55	278	13058
1894.....	7648	158	1614	857	2673	12950	54	296	13300
1895.....	7957	152	1726	864	2790	13489	54	309	13852
Average of } 5 years.	7512	156	1590	871	2654	12783	55	283	13121
1896.....	8293	144	1614	841	2811	13703	57	333	14093

APPENDIX A.—TABLE III.

Proportions, founded on the figures of Table I., of Private Lunatics and of Pauper Lunatics in Asylums and Private Dwellings per 100,000 of the Population; the Proportion of Registered Paupers per 100,000 of Population; and the Proportion of Pauper Lunatics per 100,000 of Registered Paupers, for each Year from 1858 to 1896.

YEARS.	Population.*	Proportions per 100,000 of Population.								Proportion of Pauper Lunatics in every 100,000 of Registered Paupers.
		Private Lunatics.			Pauper Lunatics.			* Total Number of Lunatics.	* Number of Registered Paupers.	
		In Asylums.	In Private Dwellings.	Total.	In Asylums and other Establishments.	In Private Dwellings.	Total.			
1858	3,027,665	34	1	35	98	59	157	192	2630	5980
1859	3,041,812	33	1	34	102	62	164	198	2616	6287
1860	3,054,738	32	1	33	111	61	172	205	2581	6657
Average of 5 Years, 1861-1865.		33	1	34	117	54	171	205	2528	6770
Average of 5 Years, 1866-1870.		35	1	36	132	47	179	215	2411	7415
Average of 5 Years, 1871-1875.		37	2	39	147	43	190	229	2183	8727
1876	3,552,183	37	3	40	157	39	196	236	1868	10,527
1877	3,590,022	38	3	41	163	40	203	244	1818	11,138
1878	3,628,268	38	3	41	168	39	207	248	1729	11,965
1879	3,665,443	37	3	40	173	39	212	252	1686	12,574
1880	3,705,995	38	3	41	177	39	216	257	1700	12,661
Av. of 5 Yrs.		38	3	41	168	39	207	248	1759	11773
1881	3,742,564	38	3	41	181	41	222	263	1700	13,074
1882	3,770,657	38	3	41	187	42	229	270	1662	13,790
1883	3,798,961	38	3	41	186	45	231	272	1622	14,244
1884	3,827,478	38	3	41	186	48	234	275	1566	14,946
1885	3,856,307	38	3	41	187	49	236	277	1524	15,485
Av. of 5 Yrs.		38	3	41	186	45	231	272	1614	14308
1886	3,885,155	38	3	41	188	53	241	282	1515	15,931
1887	3,914,318	38	3	41	187	55	242	283	1516	15,970
1888	3,943,701	39	3	42	189	58	247	289	1499	16,455
1889	3,973,305	41	3	44	193	58	251	295	1483	16,924
1890	4,003,132	41	3	44	196	62	258	302	1466	17,573
Av. of 5 Yrs.		40	3	43	190	57	247	290	1495	16,571
1891	4,033,180	42	3	45	200	62	262	307	1435	18,244
1892	4,063,452	42	3	45	203	60	263	308	1400	18,847
1893	4,093,959	44	3	47	205	62	267	314	1448	18,413
1894	4,124,691	44	3	47	207	63	270	317	1461	18,455
1895	4,155,654	45	3	48	214	65	279	327	1479	18,836
Av. of 5 Yrs.		43	3	46	206	62	268	314	1445	18559
1896	4,186,849	46	3	49	216	65	281	330	1493	18786

* The number of Lunatics is taken at the 1st January of each year, and the number of ordinary Paupers at 15th May preceding. The calculations are made on the Population of the previous year—*e.g.*, the calculations for 1896 are made on the population for 1895—the Population being that of the middle of the year, as estimated by the Registrar-General.

APPENDIX A.—TABLE IV.

Showing the Total Number of Private and Pauper Lunatics on the Register at 1st January of each year, from 1874 to 1896, the Number placed each year on the Register, the Number removed therefrom each year by discharge or death, and the Proportion of Deaths per cent. of the Average Number on the Register.

YEARS.	Number of Lunatics at 1st January of each Year.	Average Number of Lunatics on the Register in each Year.	Number placed on the Register in each Year.	Removed from the Register in each Year.			Excess of Number placed on the Register in each Year over Number removed from Register, including deaths.	Proportion of deaths per cent. on Average Number on the Register in each Year.
				By Recovery or otherwise ceasing to be under the cognizance of the Board.	Died.	Total.		
1874	7885	7959·0	2033	1274	611	1885	148	7·7
1875	8033	8171·0	2259	1335	648	1983	276	7·9
1876	8309	8480·0	2464	1451	671	2122	342	7·9
1877	8651	8768·5	2441	1559	647	2206	235	7·4
1878	8886	9022·0	2414	1485	657	2142	272	7·3
1879	9158	9271·0	2347	1422	699	2121	226	7·5
Average of 5 Years. 1880		8742·5	2385	1450	664	2114	270	7·6
1881	9384	9573·0	2548	1491	679	2170	378	7·1
1882	9762	9928·5	2616	1548	735	2283	333	7·4
1883	10095	10169·5	2435	1512	774	2286	149	7·6
1884	10244	10351·0	2682	1665	803	2468	214	7·8
1885	10458	10542·5	2595	1646	780	2426	169	7·4
Average of 5 Years. 1886		10112·9	2575	1572	754	2326	249	7·5
1887	10627	10761·0	2543	1481	794	2275	268	7·4
1888	10895	10960·0	2451	1518	803	2321	130	7·3
1889	11025	11177·0	2524	1437	783	2220	304	7·0
1890	11329	11496·5	2643	1486	822	2308	335	7·1
Average of 5 Years. 1891		11245·1	2573	1496	802	2298	274	7·1
1892	11664	11831·0	2703	1559	810	2369	334	6·8
1893	11998	12139·0	2749	1567	900	2467	282	7·4
1894	12280	12374·5	2917	1629	1099	2728	189	8·9
1895	12469	12597·0	2933	1691	986	2677	256	7·8
1896	12725	12837·5	3060	1840	995	2835	225	7·8
Average of 5 Years. 1897		12633·5	2972	1694	980	2674	298	7·8
1898	12950	13219·5	3203	1746	918	2664	539	6·9
1899	13489	13596·0	3079	1765	1100	2865	214	8·1
1900	13703							

APPENDIX A.—TABLE V.

Showing for each year, from 1874 to 1895, the Total Number of Private and Pauper Lunatics in Scotland, Registered during the year, who had never previously been Registered as Lunatics, and the Proportion of such Lunatics per 100,000 of Population.

YEAR.	Population of Scotland estimated to the middle of the Year.	Number of <i>Private</i> Lunatics Registered each year who had never previously been Registered.			Number of <i>Pauper</i> Lunatics Registered each year who had never previously been Registered.			Total Number of Lunatics Registered each year who had never previously been Registered.			Proportion of Lunatics Registered each year who had never previously been Registered, per 100,000 of the Population.		
		Estab-lish-ments.	Private Dwellings.	Total.	Estab-lish-ments.	Private Dwellings.	Total.	Private.	Pauper.	Total.	Private.	Pauper.	Total.
1874	3,477,704	324	13	337	1141	60	1201	337	1201	1538	9.7	34.5	44.2
1875	3,514,744	376	11	387	1223	134	1357	387	1357	1744	11.0	38.6	49.6
1876	3,552,183	417	6	423	1352	126	1478	423	1478	1901	11.9	41.6	53.5
1877	3,590,022	347	11	358	1424	80	1504	358	1504	1862	10.0	41.9	51.9
1878	3,628,268	332	8	340	1352	104	1456	340	1456	1796	9.4	40.1	49.5
1879	3,665,443	319	13	332	1315	87	1402	332	1402	1734	9.1	38.2	47.3
1880	3,705,995	340	15	355	1445	133	1578	355	1578	1933	9.6	42.6	52.2
1881	3,742,564	332	4	336	1531	122	1653	336	1653	1989	9.0	44.2	53.2
1882	3,770,657	303	4	307	1375	116	1491	307	1491	1798	8.1	39.5	47.6
1883	3,798,961	378	17	395	1492	129	1621	395	1621	2016	10.4	42.7	53.1
1884	3,827,478	368	9	377	1460	88	1548	377	1548	1925	9.9	40.4	50.3
1885	3,856,307	320	8	328	1414	117	1531	328	1531	1859	8.5	39.7	48.2
1886	3,885,155	347	9	356	1358	98	1456	356	1456	1812	9.1	37.5	46.6
1887	3,914,318	363	5	368	1404	112	1516	368	1516	1884	9.4	38.7	48.1
1888	3,943,701	387	6	393	1485	104	1589	393	1589	1982	10.0	40.3	50.3
1889	3,973,305	379	8	387	1480	151	1631	387	1631	2018	9.7	41.1	50.8
1890	4,003,132	413	7	420	1568	103	1671	420	1671	2091	10.5	41.7	52.2
1891	4,033,180	426	4	430	1642	97	1739	430	1739	2169	10.7	43.1	53.8
1892	4,063,452	419	3	422	1718	115	1833	422	1833	2255	10.4	45.1	55.5
1893	4,093,959	417	7	424	1764	115	1879	424	1879	2303	10.4	45.9	56.3
1894	4,124,691	387	9	396	1924	127	2051	396	2051	2447	9.6	49.7	59.3
1895	4,155,654	417	5	422	1751	123	1904	422	1904	2326	10.2	45.8	56.0

APPENDIX A.—TABLE VI.

The Numbers of Private and Pauper Lunatics resident in Royal, District, Private, and Parochial Asylums, and in Lunatic Wards of Poorhouses, on 1st January of each year from 1858 to 1895; the Numbers therein Admitted; the Numbers therefrom Discharged Recovered and Not Recovered; the Numbers Transferred from one establishment to another; and the Numbers that Died therein in each of the said years.

YEARS.	Number Resident at 1st January.						Number Admitted during Year (including Transfers).						Number Discharged during Year.						Number Transferred during Year.						Number of Deaths during Year.													
	Private.			Pauper.			Private.			Pauper.			Private.			Pauper.			Private.			Pauper.			Private.			Pauper.										
	M.	F.	M.	M.	F.	M.	M.	F.	M.	F.	M.	M.	F.	M.	F.	M.	M.	F.	M.	F.	M.	M.	F.	M.	F.	M.	M.	F.										
	1858.	1859.	1860.	1861.	1862.	1863.	1864.	1865.	1866.	1867.	1868.	1869.	1870.	1871.	1872.	1873.	1874.	1875.	1876.	1877.	1878.	1879.	1880.	1881.	1882.	1883.	1884.	1885.	1886.	1887.	1888.	1889.	1890.	1891.	1892.	1893.	1894.	1895.
Average of 5 Years, 1860-1864.	495	512	1637	1900	196	208	599	680	71	85	199	263	70	75	186	215	10	8	119	122	41	32	169	161														
Average of 5 Years, 1865-1869.	549	569	1926	2168	225	237	751	895	82	101	236	291	77	81	240	312	16	18	168	235	44	39	186	186														
Average of 5 Years, 1870-1874.	592	635	2304	2596	226	257	827	960	84	94	319	394	81	100	244	287	22	26	136	166	47	44	218	227														
1875.	623	664	2473	2801	252	270	1097	1134	87	111	330	446	87	105	427	340	11	21	319	211	59	44	235	223														
1876.	629	657	2583	2948	279	283	1105	1285	80	109	416	487	97	82	350	442	18	9	237	318	59	55	228	230														
1877.	660	697	2897	3076	272	280	1054	1209	94	120	391	509	112	107	313	314	31	20	173	166	50	41	240	230														
1878.	667	686	2813	3227	257	260	1077	1153	93	98	385	476	103	104	318	332	19	25	163	182	50	32	238	251														
1879.	657	701	2960	3332	290	298	1070	1108	73	104	393	472	114	114	297	329	35	27	170	196	43	43	294	289														
Average of 5 Years.	647	681	2705	3077	270	260	1081	1178	86	108	383	478	103	102	341	351	23	21	173	215	56	43	247	235														
1880.	725	662	3055	3419	214	265	1074	1269	81	86	438	503	80	95	297	364	13	17	159	199	54	38	233	255														
1881.	719	692	3167	3555	234	237	1206	1366	101	105	403	579	82	73	379	404	11	13	220	241	57	43	259	280														
1882.	701	708	3343	3664	205	261	1117	1272	67	83	428	534	59	88	429	444	11	13	221	193	60	47	291	275														
1883.	706	703	3325	3692	240	261	1153	1325	86	99	480	555	98	87	352	439	19	20	132	201	49	43	294	311														
1884.	710	731	3352	3726	249	263	1193	1381	101	112	486	504	89	83	360	463	20	12	174	209	53	49	303	275														
Average of 5 Years.	712	699	3248	3611	228	253	1149	1303	87	97	447	535	81	95	364	423	17	15	183	209	55	44	276	285														
1885.	715	747	3401	3773	209	266	1248	1318	54	107	428	492	73	96	477	535	9	19	264	242	74	43	275	306														
1886.	707	762	3484	3764	221	266	1189	1194	88	89	453	508	73	102	397	447	21	23	198	188	54	45	288	288														
1887.	708	781	3541	3725	235	255	1266	1262	98	111	392	484	78	97	322	454	17	23	169	185	44	44	314	282														
1888.	728	813	3612	3774	233	276	1204	1313	73	110	410	534	70	96	356	335	14	23	190	151	52	49	296	312														
1889.	759	877	3721	3879	229	229	1264	1313	75	126	445	493	74	115	398	409	9	18	172	183	56	43	303	290														
Average of 5 Years.	723	796	3652	3783	229	233	1178	1273	78	109	426	503	74	99	390	436	14	21	199	190	56	45	295	296														
1890.	773	864	3789	3999	261	291	1237	1297	104	122	456	519	76	78	367	372	15	15	162	159	82	38	334	304														
1891.	771	908	3884	4104	284	323	1254	1449	104	122	445	514	90	100	388	427	16	18	152	168	68	84	398	378														
1892.	788	914	3963	4344	270	302	1335	1432	73	126	528	584	85	81	389	421	21	21	168	195	70	51	403	342														
1893.	825	948	3979	4339	288	287	1388	1463	93	131	543	642	80	76	384	441	17	17	168	195	70	48	382	341														
1894.	861	940	4062	4414	266	280	1312	1376	87	110	533	597	76	94	433	464	12	19	199	228	60	48	356	344														
Average of 5 Years.	804	915	3935	4220	274	295	1345	1443	91	119	501	571	81	86	382	420	16	18	170	190	71	61	375	344														
1895.	915	968	4241	4575	247	301	1614	1640	94	109	550	614	86	86	365	402	18	15	180	195	75	63	375	380														

* Including Patients transferred from one Establishment to another.

APPENDIX A.—TABLE VII.*

Number of Admissions to Asylums and other Establishments, excluding Transfers from one Establishment to another, in each Year from 1858 to 1895.

YEARS.	Number placed in Establishments, excluding Transfers from one Establishment to another.								
	Private.			Pauper.			General Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
1858.....	193	213	406	436	606	1042	629	819	1448
1859.....	201	190	391	476	555	1031	677	745	1422
Average of 5 Years, 1860-1864. }	186	199	335	481	558	1039	667	757	1424
Average of 5 Years, 1865-1869. }	210	221	431	582	660	1242	792	881	1673
Average of 5 Years, 1870-1874. }	204	232	436	691	794	1485	895	1026	1921
1875.....	241	249	490	778	923	1701	1019	1172	2191
1876.....	261	274	535	868	967	1835	1129	1241	2370
1877.....	241	230	471	881	1043	1924	1122	1273	2395
1878.....	238	232	470	911	971	1882	1149	1203	2352
1879.....	255	211	466	900	912	1812	1155	1123	2278
Average of 5 Years. }	247	239	486	868	963	1831	1115	1202	2317
1880.....	201	248	449	915	1070	1985	1116	1318	2434
1881.....	213	226	439	976	1125	2101	1189	1351	2540
1882.....	194	221	415	896	1079	1975	1090	1300	2390
1883.....	221	241	462	1021	1124	2145	1242	1365	2607
1884.....	229	256	485	1021	1072	2093	1250	1328	2578
Average of 5 Years. }	212	238	450	966	1094	2060	1178	1332	2510
1885.....	200	247	447	984	1076	2060	1184	1323	2507
1886.....	200	243	443	991	1006	1997	1191	1249	2440
1887.....	238	263	501	920	1077	1997	1158	1340	2498
1888.....	219	300	519	968	1127	2095	1187	1427	2614
1889.....	220	259	479	1032	1129	2161	1252	1388	2640
Average of 5 Years. }	215	262	477	979	1083	2062	1194	1345	2539
1890.....	246	276	522	1075	1138	2213	1321	1414	2735
1891.....	268	305	573	1102	1251	2353	1370	1556	2926
1892.....	249	281	530	1167	1237	2404	1416	1518	2934
1893.....	271	260	531	1220	1293	2513	1491	1553	3044
1894.....	254	261	515	1313	1343	2661	1567	1609	3176
Average of 5 Years. }	257	277	534	1175	1253	2428	1433	1530	2963
1895.....	229	286	515	1229	1305	2534	1458	1591	3049

* Patients sent to Training Schools for Imbecile Children and to the Lunatic Department of the General Prison are not included in this or the following Table.

APPENDIX A.—TABLE VIII.

The Numbers of Discharges from Asylums and other Establishments, excluding Transfers, and the Numbers of Deaths therein during each Year from 1858 to 1895.

YEARS.	Removals Recovered.		Removals not Recovered, excluding Transfers.		Removals by Death.		Total Removals.		
	Private.	Pauper.	Private.	Pauper.	Private.	Pauper.	Private.	Pauper.	Total.
1858.....	171	452	146	90	80	290	397	832	1229
1859.....	162	442	125	66	84	276	371	784	1155
Average of } 5 Years, 1860-1864.	156	463	127	159	74	330	357	952	1309
Average of } 5 Years, 1865-1869.	183	527	124	149	83	372	390	1048	1438
Average of } 5 Years, 1870-1874.	179	713	132	230	90	444	401	1387	1788
1875.....	198	776	160	237	103	458	461	1471	1932
1876.....	189	903	152	237	124	461	465	1601	2066
1877.....	214	900	168	288	91	470	473	1658	2131
1878.....	193	861	160	302	89	489	442	1652	2094
1879.....	177	865	166	260	86	533	429	1658	2087
Average of } 5 Years.	194	861	161	265	99	482	454	1608	2062
1880.....	167	941	145	303	92	518	404	1762	2166
1881.....	206	982	123	312	100	539	429	1833	2262
1882.....	150	962	123	459	107	566	380	1987	2367
1883.....	185	1035	146	458	92	605	423	2098	2521
1884.....	213	990	140	440	102	578	455	2008	2463
Average of } 5 Years.	184	982	135	394	99	561	418	1937	2355
1885.....	161	920	141	506	117	581	419	2007	2426
1886.....	177	961	131	458	99	576	407	1995	2402
1887.....	209	876	125	422	88	596	422	1894	2316
1888.....	183	944	130	350	101	608	414	1902	2316
1889.....	201	944	162	452	99	593	462	1989	2451
Average of } 5 Years.	186	929	138	437	101	591	425	1957	2382
1890.....	199	975	124	418	140	638	463	2031	2494
1891.....	226	959	156	415	152	776	534	2150	2684
1892.....	204	1112	124	447	121	745	449	2304	2753
1893.....	224	1185	122	463	144	723	490	2371	2861
1894.....	197	1130	139	470	106	712	442	2312	2754
Average of } 5 Years.	210	1072	133	443	133	719	476	2234	2709
1895.....	203	1164	131	419	125	814	459	2397	2856

APPENDIX A.—TABLE IX.

The Results of Treatment in different classes of Establishments for each Year from 1858 to 1895.

(a) *Royal and District Asylums.*

ROYAL AND DISTRICT ASYLUMS.	Average Number Resident.			Admissions (Including Trans- fers).			Recoveries.			Discharges not Recovered (Including Transfers).			Deaths.			Proportion of Admissions per cent. on Number Resident.			Proportion of Re- coveries per cent. on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
	1253.5	1167.5	2421.0	449	498	947	151	201	352	149	140	289	109	94	203	35.8	42.6	39.1	33.6	40.3	37.2	8.6	8.0	8.4
Year 1858.....	1307.0	1242.5	2549.5	463	455	918	149	186	335	126	109	235	107	93	200	35.9	36.6	36.0	32.1	40.8	36.5	8.1	7.4	7.8
" 1859.....																								
Average of 5 Years 1860-1864.....	1434.8	1440.4	2875.2	498	534	1032	174	208	382	150	161	311	132	103	235	34.7	37.1	35.9	35.0	39.0	37.0	9.2	7.1	8.2
Average of 5 Years 1865-1869.....	1853.1	1889.0	3742.1	709	746	1455	230	275	505	182	196	378	163	152	315	38.2	39.5	38.9	32.5	36.9	34.7	8.8	8.0	8.4
Average of 5 Years 1870-1874.....	2292.6	2345.3	4637.9	794	883	1677	314	373	687	236	256	492	202	188	390	34.6	37.7	36.2	39.6	42.3	41.0	8.8	8.0	8.4
Year 1875.....	2460.1	2609.0	5075.0	953	984	1937	325	425	750	261	257	518	236	172	408	38.6	37.7	35.2	34.1	43.2	38.7	9.6	6.6	8.0
" 1876.....	2501.5	2695.5	5197.0	867	975	1842	333	434	767	272	272	544	210	185	425	34.7	36.2	35.4	38.4	44.5	41.6	8.4	8.0	8.2
" 1877.....	2578.0	2764.5	5342.5	892	1018	1910	325	459	784	271	275	546	206	183	389	34.6	36.8	35.8	36.4	45.1	41.0	8.0	6.6	7.3
" 1878.....	2680.0	2870.5	5550.5	924	970	1894	336	414	750	275	259	534	212	191	403	34.5	33.8	34.1	36.4	42.7	39.6	7.9	6.7	7.3
" 1879.....	2738.0	2932.0	5730.0	938	917	1856	337	429	766	247	277	524	233	206	439	33.2	31.3	32.4	35.9	46.8	41.3	8.3	7.0	7.7
Average of 5 Years.....	2604.7	2774.3	5379.0	915	973	1888	331	432	763	262	274	556	219	193	412	35.1	35.1	35.1	36.2	44.4	40.4	8.4	7.0	7.7
Year 1880.....	2890.5	2981.5	5872.0	852	1026	1878	350	420	770	242	299	541	215	235	450	29.5	34.4	32.0	41.1	40.9	41.0	7.4	7.9	7.7
" 1881.....	3013.1	3096.1	6109.2	1021	1189	2210	372	498	870	291	320	611	231	230	461	33.9	38.4	36.2	36.4	41.9	39.4	7.7	7.4	7.5
" 1882.....	3035.5	3153.5	6189.0	930	1099	2029	331	470	821	305	378	683	282	238	559	30.6	34.8	32.8	37.7	42.7	40.3	9.3	7.3	8.4
" 1883.....	3028.5	3186.5	6215.0	1011	1147	2168	419	501	919	346	335	681	250	261	511	33.4	36.0	34.7	41.4	42.6	42.6	8.3	8.2	8.2
" 1884.....	3035.0	3237.0	6272.0	1038	1164	2222	446	474	920	330	406	736	262	235	497	34.9	36.0	35.4	42.2	40.7	41.4	8.6	7.3	7.9
Average of 5 Years.....	3000.5	3130.9	6131.4	974	1125	2099	388	472	860	303	348	651	248	240	488	32.5	35.9	34.2	39.8	42.0	41.0	8.3	7.7	8.0
Year 1885.....	3056.0	3245.0	6301.0	1037	1110	2147	359	445	804	389	441	830	263	257	520	33.9	34.2	34.1	34.6	40.1	37.4	8.6	7.9	8.3
" 1886.....	3074.0	3237.5	6311.5	1018	1060	2078	418	450	868	337	357	694	253	234	487	33.1	32.7	32.9	41.1	42.5	41.8	8.3	7.2	7.7
" 1887.....	3119.0	3269.0	6388.0	983	1101	2094	386	452	838	269	359	628	257	246	503	31.8	33.7	32.8	39.0	41.1	40.1	8.2	7.5	7.9
" 1888.....	3158.5	3358.5	6517.0	1039	1161	2220	365	468	833	300	307	607	253	250	503	33.3	34.6	33.4	35.1	40.3	37.9	7.9	7.4	7.6
" 1889.....	3224.0	3470.0	6694.0	1053	1162	2215	383	463	846	332	360	692	254	248	502	31.7	33.5	32.6	36.4	39.8	38.1	7.6	7.1	7.4
Average of 5 Years.....	3158.6	3316.0	6474.6	1028	1119	2147	392	456	838	325	365	690	256	247	503	32.5	33.7	33.2	37.2	40.8	39.0	8.1	7.4	7.8
Year 1890.....	3413.0	3586.5	6999.5	1107	1178	2285	393	463	856	311	290	601	314	233	537	32.4	32.8	32.6	35.5	37.5	37.5	9.2	7.9	8.5
" 1891.....	3507.0	3724.5	7231.5	1137	1347	2484	395	484	879	318	368	686	329	359	688	32.4	36.2	34.3	34.7	35.9	35.4	9.4	9.6	9.5
" 1892.....	3570.0	3847.5	7417.5	1210	1298	2508	473	552	1025	326	316	631	382	289	671	33.9	33.7	33.8	39.1	42.5	40.9	10.7	7.5	9.0
" 1893.....	3640.5	3927.5	7568.0	1261	1308	2569	479	605	1084	326	336	662	343	318	663	33.9	33.3	33.9	38.0	46.3	42.2	9.5	8.1	8.8
" 1894.....	3776.5	4026.0	7802.5	1301	1306	2607	461	500	961	339	365	704	340	293	633	34.4	32.4	33.4	35.4	38.3	36.9	9.0	7.3	8.1
Average of 5 Years.....	3581.4	3822.4	7403.8	1203	1287	2490	440	521	941	324	341	655	342	308	650	33.6	33.7	33.6	36.6	40.5	38.6	9.5	8.1	8.8
Year 1895.....	3992.0	4254.0	8246.0	1434	1475	2909	474	544	1018	467	395	862	380	313	693	35.9	34.7	35.3	33.0	36.9	35.0	9.5	7.4	8.4

APPENDIX A.—TABLE IX.—*continued.*

The Results of Treatment in different classes of Establishments for each year from 1858 to 1895.

(b) *Private Asylums.*

PRIVATE ASYLUMS.	Average Number Resident.			Admissions (Including Transfers).			Recoveries.			Discharges not Recovered (Including Transfers).			Deaths.			Proportion of Admissions per cent. on Resident.			Proportion of Recoveries per cent. on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
YEAR 1858.....	355.0	462.0	817.0	125	222	347	44	86	134	21	35	56	30	35	65	35.2	48.0	42.5	38.4	38.7	38.6	8.4	7.5	8.0
" 1859.....	351.5	490.0	841.5	113	168	281	48	66	110	27	39	66	38	30	68	32.1	34.3	33.4	38.9	39.3	39.1	10.8	6.1	8.1
Average of 5 Years, 1860-1864.....	385.9	501.5	887.4	132	173	305	32	61	93	66	80	146	30	41	71	34.3	34.5	34.4	24.3	35.0	30.5	7.9	8.2	8.0
Average of 5 Years, 1865-1869.....	258.5	350.8	609.3	118	163	286	40	56	96	87	118	205	25	28	53	45.6	47.9	46.9	34.1	33.6	33.6	9.7	8.0	8.7
Average of 5 Years, 1870-1874.....	126.0	211.1	337.1	69	102	171	20	32	52	9	62	101	16	17	33	54.9	48.1	50.7	29.5	31.3	30.4	12.5	8.2	9.8
YEAR 1875.....	78.0	145.0	223.0	37	55	92	21	25	46	12	53	65	8	11	19	47.4	37.9	41.3	55.8	45.5	50.0	10.3	7.6	8.5
" 1876.....	75.0	125.0	200.0	35	52	87	11	20	31	9	15	24	12	3	15	46.7	41.6	43.5	51.4	38.5	35.6	16.3	9.4	7.5
" 1877.....	77.5	129.0	206.5	41	45	86	14	25	39	13	12	25	8	10	18	52.9	34.5	41.6	34.1	35.6	45.3	10.3	7.8	8.7
" 1878.....	70.7	130.0	206.7	34	51	85	16	18	34	13	23	36	13	7	20	44.3	39.2	41.1	47.1	33.3	40.0	16.9	5.4	9.7
" 1879.....	73.5	127.7	201.2	25	34	59	6	15	21	36	36	72	5	6	11	34.0	26.6	29.3	24.0	44.1	35.6	6.8	4.7	5.5
Average of 5 Years.....	76.1	131.3	207.4	34	47	81	14	21	35	17	28	45	9	7	6	45.2	36.1	39.1	39.5	43.5	43.2	12.1	5.6	7.7
YEAR 1880.....	50.0	107.5	157.5	14	29	43	5	11	16	5	14	19	5	3	8	38.0	27.0	27.3	35.7	37.9	37.2	10.0	2.8	5.1
" 1881.....	47.5	109.0	156.5	17	24	41	9	12	21	8	5	13	5	3	6	35.8	22.0	26.2	32.9	30.0	51.2	6.3	5.5	5.8
" 1882.....	44.5	108.0	152.5	13	23	36	5	7	12	3	12	15	3	8	16	29.2	21.3	23.6	38.5	30.4	33.3	18.0	7.4	10.5
" 1883.....	46.5	110.0	156.5	17	28	45	3	2	5	2	13	15	4	6	10	36.6	25.5	28.8	17.6	7.1	11.1	8.6	5.6	6.4
" 1884.....	48.0	107.5	155.5	8	13	21	7	8	15	4	7	11	1	10	11	16.7	12.1	13.5	37.5	61.5	71.4	2.1	9.3	7.1
Average of 5 Years.....	47.3	108.4	155.7	14	23	37	6	8	14	4	10	14	4	7	11	29.2	21.6	23.8	42.0	34.2	37.8	8.9	6.1	7.1
YEAR 1885.....	44.0	99.5	143.5	6	26	32	2	14	16	4	7	11	6	8	14	13.6	26.1	22.3	33.3	53.8	50.0	13.6	8.0	9.8
" 1886.....	40.5	97.5	138.0	11	20	31	3	5	8	8	12	20	3	11	14	27.2	20.5	22.7	27.3	25.0	25.8	7.4	11.3	10.1
" 1887.....	41.0	97.0	138.0	21	28	49	5	8	13	5	9	13	4	9	17	51.2	32.9	35.5	23.8	28.6	26.5	14.6	1.0	5.1
" 1888.....	46.0	107.0	153.0	15	33	48	3	9	12	4	9	13	4	9	13	32.6	30.8	31.4	20.0	27.3	25.0	8.7	8.4	8.5
" 1889.....	47.5	109.5	157.0	18	30	48	8	14	22	8	10	18	3	7	10	37.9	27.4	30.6	44.4	46.7	45.8	6.3	6.4	6.4
Average of 5 Years.....	43.8	102.1	145.9	14	27	41	4	10	14	6	8	14	4	7	11	32.0	26.4	28.1	28.6	37.0	34.1	10.0	7.1	8.0
YEAR 1890.....	45.5	108.5	154.0	13	33	46	3	13	16	7	15	22	6	6	12	28.6	30.4	29.9	23.1	39.4	34.8	13.2	5.5	7.8
" 1891.....	47.0	110.5	157.5	20	27	47	7	6	13	4	11	15	3	5	8	42.6	24.4	29.8	35.0	22.2	27.7	6.4	4.5	5.1
" 1892.....	51.5	108.5	160.0	16	27	43	3	16	19	8	11	13	3	9	12	31.1	24.9	26.9	18.8	59.3	44.2	5.8	8.3	7.5
" 1893.....	56.0	101.5	157.5	17	23	40	3	12	15	5	10	15	3	5	8	52.2	22.5	25.4	17.6	52.2	37.5	5.4	5.9	5.7
" 1894.....	61.5	93.0	154.5	17	21	38	3	16	19	6	11	17	3	5	8	27.6	22.5	24.6	17.6	76.2	50.0	4.9	5.4	5.2
Average of 5 Years.....	52.3	104.4	156.7	17	26	43	3	13	16	6	12	18	4	6	10	31.7	25.1	27.3	22.9	48.1	38.3	6.9	5.9	6.3
YEAR 1895.....	60.5	87.5	148.0	14	21	35	4	5	9	11	7	18	6	10	16	23.1	24.0	23.6	28.6	23.8	25.7	9.9	11.4	10.8

APPENDIX A.—TABLE IX.—*continued.*
 The Results of Treatment in different classes of Establishments for each Year from 1858 to 1895.
 (c) *Parochial Asylums.*
 (Lunatic Wards of Poorhouses with Unrestricted Licences).

PAROCHIAL ASYLUMS.	Average Number Resident.			Admissions (Including Transfers).			Recoveries.			Discharges not Recovered (Including Transfers).			Deaths.			Proportion of Admissions per cent. on Number Resident.			Proportion of Re-Admissions on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
YEAR 1858.....	187.0	245.0	432.0	131	166	276	45	89	134	16	18	34	37	23	74	58.8	67.7	63.9	40.9	52.4	48.6	19.7	15.1	17.1
" 1859.....	199.5	268.5	468.0	110	162	293	57	95	152	22	22	44	37	37	60	65.8	60.4	62.6	43.5	58.6	51.9	18.5	8.5	12.8
Average of 5 Years, 1860-1864.....	204.0	280.0	484.0	124	133	257	62	72	134	28	34	62	33	28	61	60.6	47.4	53.1	49.8	54.1	52.1	16.3	10.1	12.6
Average of 5 Years, 1865-1869.....	198.3	262.1	460.4	89	120	209	44	54	98	26	33	59	20	21	41	44.9	45.9	45.4	49.4	44.7	46.9	10.3	8.2	8.9
Average of 5 Years, 1870-1874.....	253.0	373.2	626.2	139	168	307	64	78	142	36	42	78	27	38	65	54.9	45.1	49.0	46.4	46.4	46.3	10.7	10.2	10.4
YEAR 1875.....	361.0	441.0	802.0	321	296	617	70	103	173	131	115	246	38	59	97	88.9	67.1	76.9	21.8	34.8	28.0	10.5	13.4	12.1
" 1876.....	457.5	565.0	1022.5	419	481	900	143	139	282	160	178	338	64	46	110	91.3	85.1	88.0	34.1	28.9	31.3	14.0	8.1	10.8
" 1877.....	470.0	538.0	1008.0	350	385	735	138	134	272	135	112	247	53	58	111	74.5	56.3	64.3	39.4	40.0	39.7	11.3	9.7	10.4
" 1878.....	501.5	613.5	1115.0	340	345	685	127	136	263	113	144	259	59	60	119	67.8	56.2	61.4	39.4	39.4	38.4	11.8	9.8	10.7
" 1879.....	543.0	641.0	1184.0	348	330	678	116	125	241	116	110	226	74	47	121	64.1	51.5	57.3	33.3	37.9	35.5	13.6	7.8	10.2
Average of 5 Years.....	466.6	571.1	1037.7	356	357	713	119	127	246	131	132	263	53	54	112	76.2	62.6	68.7	33.4	35.6	34.5	12.3	9.5	10.8
YEAR 1880.....	581.5	704.0	1285.5	365	419	784	162	153	315	120	127	247	48	61	109	62.8	59.5	61.0	44.4	36.5	40.2	8.3	8.7	8.5
" 1881.....	617.5	728.5	1346.0	331	331	662	122	170	292	128	124	262	57	66	123	57.3	45.4	50.9	34.5	51.4	42.6	9.2	9.1	9.1
" 1882.....	616.0	729.5	1345.5	332	319	651	139	140	279	153	97	250	44	51	95	53.9	43.7	48.4	41.9	43.9	42.9	7.1	7.0	7.1
" 1883.....	646.5	741.0	1387.5	315	348	663	137	145	282	76	145	221	73	66	139	48.7	47.0	47.8	43.5	41.7	42.5	11.3	8.9	10.0
" 1884.....	670.0	746.5	1416.5	310	293	603	132	127	259	85	89	174	75	57	132	46.3	39.2	42.6	42.6	43.3	43.0	11.2	7.6	9.3
Average of 5 Years.....	626.3	729.9	1356.2	335	342	677	138	147	285	114	116	230	59	50	119	53.5	46.9	49.9	41.3	43.0	42.1	9.5	8.2	8.8
YEAR 1885.....	676.5	763.5	1440.0	270	312	582	108	133	241	103	111	214	64	53	117	39.9	40.9	40.4	40.0	42.6	41.4	9.5	6.9	8.1
" 1886.....	687.0	757.5	1444.5	279	286	565	116	135	251	71	124	195	66	54	120	40.5	37.8	39.1	41.6	47.2	44.4	9.6	7.1	8.3
" 1887.....	689.5	722.5	1452.0	254	321	575	92	131	223	81	114	195	82	59	141	36.3	42.7	39.6	36.2	40.8	38.8	11.7	7.8	9.7
" 1888.....	702.0	774.5	1476.5	263	348	611	109	164	273	86	184	170	62	74	136	37.5	44.9	41.4	41.4	47.1	44.7	8.8	9.6	9.2
" 1889.....	708.0	794.0	1502.0	305	339	644	125	147	272	91	126	217	83	54	137	43.1	42.7	41.0	43.4	42.2	42.2	11.7	6.8	9.1
Average of 5 Years.....	694.6	768.4	1463.0	274	321	595	110	142	252	86	112	198	71	59	130	39.4	41.8	40.7	40.1	44.2	42.4	10.3	7.7	8.9
YEAR 1890.....	709.5	804.5	1514.0	304	322	626	147	141	288	84	114	198	77	57	134	42.8	40.0	41.3	48.4	46.0	46.0	10.9	7.1	8.9
" 1891.....	709.5	811.0	1520.5	329	325	654	136	141	277	74	103	177	116	77	193	46.4	40.1	43.0	41.3	42.4	43.4	16.3	9.5	12.7
" 1892.....	721.0	826.0	1547.0	299	313	612	126	139	265	86	85	171	67	63	130	41.5	37.9	39.6	42.1	44.4	43.3	9.3	7.6	8.4
" 1893.....	741.0	851.0	1592.0	344	340	684	152	152	304	80	101	181	93	63	156	46.4	40.0	43.0	44.2	44.7	44.4	12.6	7.4	9.8
" 1894.....	783.0	887.0	1670.0	394	447	841	150	188	338	119	130	249	61	81	142	50.3	50.4	50.4	38.1	42.1	40.2	11.8	7.8	8.5
Average of 5 Years.....	732.8	835.9	1568.7	334	349	683	142	152	294	88	107	195	83	68	151	45.6	41.8	43.6	42.6	43.6	43.1	11.3	8.2	9.6
YEAR 1895.....	782.5	887.5	1670.0	350	381	731	162	171	333	168	161	329	85	96	181	44.7	42.9	43.8	44.9	44.9	45.6	10.9	10.8	10.8

APPENDIX A.—TABLE IX.—*continued.*

The Results of Treatment in different classes of Establishments for each Year from 1858 to 1895.
(d) *Lunatic Wards of Poorhouses with Restricted Licences.*

LUNATIC WARDS OF POORHOUSES.	Average Number Resident.			Admissions (Including Trans- fers.)			Recoveries.			Discharges not Recovered (Including Transfers.)			Deaths.			Proportion of Re- admissions per cent. on Number Resident.			Proportion of Re- coveries per cent. on Admissions.			Proportion of Deaths per cent. on Number Resident.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
YEAR 1858.....	121·0	193·5	314·5	21	35	56	...	5	5	12	23	35	12	16	28	17·3	18·0	17·8	...	14·3	8·9	9·9	8·2	8·9
" 1859.....	129·5	225·0	354·5	51	60	111	...	4	5	12	15	27	19	13	32	39·3	26·6	31·3	1·9	6·6	4·5	14·7	5·7	9·0
Average of 5 Years, 1860-1864.....	153·9	229·7	383·6	39	49	88	3	6	9	11	16	27	15	21	36	25·1	21·3	22·9	8·3	13·1	10·2	9·5	9·3	9·4
Average of 5 Years, 1865-1869.....	233·2	345·4	578·6	57	97	154	4	6	10	22	44	66	21	24	45	24·3	28·1	26·6	7·8	6·4	6·5	9·2	7·0	7·8
Average of 5 Years, 1870-1874.....	257·2	339·0	596·2	51	64	115	3	6	9	14	26	40	19	27	46	19·8	18·9	19·3	5·9	9·0	7·8	7·5	8·0	7·7
YEAR 1875.....	254·5	336·5	591·0	38	69	107	1	4	5	10	20	30	12	25	37	14·9	20·5	18·1	2·6	5·8	4·7	4·7	7·4	6·3
" 1876.....	295·0	349·5	644·5	63	60	123	9	3	12	6	26	32	11	24	35	21·4	17·2	19·1	14·3	5·0	9·8	3·7	6·9	5·4
" 1877.....	297·0	357·5	654·5	43	61	104	8	11	19	23	36	49	23	20	43	14·5	17·1	15·9	18·6	18·0	18·3	7·7	5·6	6·6
" 1878.....	290·5	360·0	650·5	36	47	83	1	6	7	18	10	28	11	25	36	12·4	13·1	12·8	2·8	12·8	8·4	3·8	6·9	5·5
" 1879.....	296·0	370·5	666·5	48	65	113	7	7	14	12	20	32	25	23	48	16·2	17·5	17·0	14·6	10·8	12·4	8·4	6·2	7·2
Average of 5 Years.....	286·6	354·8	641·4	46	60	106	5	6	11	14	20	34	16	23	39	15·9	17·0	16·5	11·4	10·3	10·4	5·7	6·6	6·1
YEAR 1880.....	311·0	374·0	685·0	57	60	117	2	5	7	10	19	29	19	24	43	18·3	16·0	17·1	3·5	8·3	6·0	6·1	6·4	6·3
" 1881.....	323·0	393·0	716·0	48	59	107	1	4	5	24	28	52	25	21	46	14·9	15·0	14·9	2·1	6·8	4·7	7·7	5·3	6·4
" 1882.....	323·5	393·5	717·0	47	65	112	...	...	...	27	45	72	17	25	42	14·5	16·5	15·6	...	...	...	5·3	6·4	5·9
" 1883.....	325·5	392·0	717·5	50	63	113	7	7	14	26	33	59	16	21	37	15·4	16·1	15·7	14·0	11·1	12·4	4·9	5·4	5·2
" 1884.....	345·0	397·5	742·5	68	79	147	2	7	9	30	44	74	18	22	40	19·7	19·9	19·8	2·9	8·9	6·1	5·2	5·5	5·4
Average of 5 Years.....	325·6	390·0	715·6	54	65	119	2	5	7	23	34	57	19	23	42	16·6	16·7	16·6	4·4	7·1	5·9	5·8	5·8	5·9
YEAR 1885.....	386·5	418·5	805·0	144	136	280	13	7	20	54	72	126	16	31	47	37·3	32·5	34·8	9·0	5·1	7·1	4·1	7·4	5·8
" 1886.....	427·5	427·0	854·5	102	94	196	4	7	11	54	56	110	20	34	54	23·9	22·0	22·9	3·9	7·4	5·6	4·7	6·3	6·3
" 1887.....	436·5	431·5	868·0	76	98	174	7	4	11	45	63	108	13	20	33	17·4	22·7	20·0	9·2	4·1	6·3	3·0	4·6	3·8
" 1888.....	443·5	435·0	878·5	74	88	132	6	3	9	36	31	67	29	28	57	16·7	13·3	15·0	8·1	5·2	6·8	6·5	6·4	6·5
" 1889.....	441·5	435·5	877·0	57	58	115	4	1	5	41	28	69	19	24	43	12·9	13·3	13·1	7·0	1·7	4·3	4·3	5·5	4·9
Average of 5 Years.....	427·1	429·5	856·6	91	89	180	7	4	11	46	50	96	19	27	46	21·3	20·7	21·0	7·7	4·5	6·1	4·5	6·4	5·5
YEAR 1890.....	441·0	438·0	879·0	74	55	129	8	6	14	41	31	72	19	16	35	16·8	12·6	14·7	10·8	10·9	10·9	4·3	3·7	4·0
" 1891.....	439·5	439·0	878·5	52	73	125	11	5	16	32	45	77	18	21	38	11·8	16·6	14·2	21·2	6·8	12·8	4·1	4·8	4·4
" 1892.....	435·0	440·5	875·5	80	96	176	4	3	7	55	60	115	21	23	53	18·4	21·8	20·1	9·0	3·1	4·0	4·8	7·3	6·1
" 1893.....	423·5	440·5	874·0	54	69	123	2	4	6	53	46	99	17	22	39	15·7	15·7	14·1	3·7	5·8	4·9	3·9	5·0	4·5
" 1894.....	418·5	442·0	860·5	66	82	148	6	3	9	43	52	97	12	23	36	15·8	18·6	17·2	9·1	3·7	6·1	2·9	5·2	4·1
Average of 5 Years.....	433·5	440·0	873·5	65	75	140	6	4	10	45	47	92	17	23	40	15·0	17·0	16·1	9·5	5·6	7·4	4·0	5·2	4·6
YEAR 1895.....	417·5	435·0	852·5	63	64	127	4	3	7	45	49	94	19	30	49	15·1	14·7	14·9	6·3	4·7	5·5	4·6	6·9	5·7

APPENDIX A.—TABLE X. (b).

The Annual Number of Deaths and Classification of the Causes of Death of Patients who Died in Asylums and other Establishments for each Year from 1870 to 1895.

15

YEARS.	Average Number Resident.		Total Number of Deaths.	Number of fore-going Deaths which took place within a Year after Admission.	Proportion per cent. of Deaths which took place within a Year after Admission on Total Number of Deaths.	NUMBER OF DEATHS OF MALES AND FEMALES FROM SPECIFIC CAUSES.																																					
						CEREBRAL AND SPINAL AFFECTIONS.										THORACIC AFFECTIONS.						ABDOMINAL AFFECTIONS.						Fever, Erysipelas, Cancer, &c.	General Debility and Old Age.		Suicides and Accidents.		Cause Unknown.										
						Apoplexy and Paralysis.		Epilepsy and Convulsions.		General Paralysis.		Maniacal and Melancholic Exhaustion.		Organic Disease of Brain, Tumours, &c.		Consumption.		Inflammation of Lungs and Membranes, and other forms of Pulmonary Disease.		Disease of the Heart, Anæmia, &c.		Inflammation of Stomach, Intestines, or Peritoneum.		Disease of Liver, Kidneys, &c.		Dysentery and Diarrhœa.																	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.						
1870	2816.5	3154.0	259	282	118	129	45.6	45.7	19	23	15	16	41	8	8	23	40	19	30	62	26	32	15	17	8	7	4	6	8	6	5	9	1	12	31	40	8	8	1				
1871	2861.0	3193.0	259	280	116	111	44.8	39.6	21	23	17	13	43	14	9	14	30	34	34	51	38	28	8	17	8	8	6	8	5	9	1	12	31	40	8	8	1						
1872	2938.5	3240.5	270	244	116	97	43.0	39.8	21	16	18	8	36	13	7	11	37	31	31	50	43	31	14	15	11	12	2	6	4	3	13	10	23	32	10	5	1						
1873	2978.0	3315.0	298	269	131	113	44.0	43.9	21	17	14	10	51	13	2	17	29	22	43	51	40	21	21	19	10	4	10	12	8	15	5	12	34	51	10	5	1						
1874	3055.0	3441.0	237	277	107	117	45.1	42.2	19	26	18	20	43	13	5	15	27	27	31	46	15	25	23	19	8	5	6	11	4	16	10	7	26	40	2	6	1						
Absolute Annual Average	2928.3	3268.7	264.6	270.4	117.6	114.4	44.4	42.3	20.2	21.0	16.4	13.4	42.8	12.2	6.2	16.0	32.6	26.6	33.8	52.0	32.4	27.4	16.2	17.4	9.0	7.2	5.6	8.6	5.8	9.8	7.4	10.4	28.0	42.2	7.6	5.6	0.6	0.6					
Average Percentage of Each Cause of Death	7.6	7.8	6.2	5.0	16.2	4.5	2.3	5.9	12.3	9.3	12.8	19.2	12.2	10.1	6.1	6.4	3.4	2.7	2.1	3.2	2.2	3.6	2.8	3.8	10.6	15.6	2.9	2.1	0.2	0.2					
1875	3159.5	3531.5	294	267	136	102	46.3	38.2	29	17	20	15	63	9	9	11	23	20	41	41	27	32	11	18	2	7	8	13	7	12	9	15	30	51	15	6	.						
1876	3329.0	3735.0	297	288	148	118	49.8	41.0	33	25	13	15	57	11	16	17	20	20	44	47	36	31	16	27	5	14	7	3	5	7	8	14	27	53	10	4	.						
1877	3422.5	3846.0	290	271	124	100	42.8	36.0	27	20	22	16	54	14	6	19	32	24	30	47	34	20	22	17	8	6	8	15	2	5	16	14	24	49	5	5	.						
1878	3548.7	3974.0	295	283	146	123	49.5	43.5	22	30	12	17	56	10	11	25	27	15	37	43	34	30	26	21	9	11	6	15	4	9	12	9	33	44	6	4	.						
1879	3710.5	4071.2	337	282	137	88	40.7	31.2	28	22	35	18	41	4	10	17	34	15	39	48	38	28	29	11	9	7	4	4	9	9	12	29	57	4	1	.							
Absolute Annual Average	3434.0	3831.5	302.6	278.2	138.2	106.2	45.7	38.2	27.8	22.8	20.4	16.2	54.2	9.6	10.4	17.8	27.2	18.8	38.2	45.2	37.8	30.0	20.6	22.4	7.0	9.4	7.2	10.0	4.4	8.4	10.8	12.8	28.6	50.8	8.0	4.0	.						
Average Percentage of Each Cause of Death . . . . .	.	.	.	.	.	.	.	.	9.2	8.2	6.7	5.8	17.9	3.4	3.4	6.4	9.0	6.8	12.6	16.2	12.5	10.8	6.8	8.1	2.3	3.4	2.4	3.6	1.5	3.0	3.6	4.6	9.5	18.3	2.6	1.4	.
1880	3883.0	4167.0	287	323	119	119	41.5	36.8	31	25	19	12	47	12	5	18	30	23	29	51	36	35	27	32	13	17	7	13	5	14	12	27	22	38	4	6	.						
1881	4001.1	4326.6	316	323	139	128	44.0	39.6	42	22	17	10	51	11	10	14	35	28	36	51	36	46	18	32	6	10	9	8	6	7	16	15	26	66	8	3	.						
1882	4019.5	4384.5	351	322	134	121	38.2	37.6	39	29	27	14	58	13	7	16	33	27	37	65	42	32	30	25	7	11	12	8	5	6	12	21	34	55	8	.							
1883	4047.0	4429.5	343	354	150	128	43.7	36.2	39	31	21	18	58	15	7	21	31	35	42	55	52	31	24	41	9	14	7	7	2	3	10	19	31	57	10	7	.						
1884	4098.0	4488.8	356	324	141	137	39.6	42.3	27	30	20	11	55	10	17	16	35	42	42	40	55	44	36	36	7	12	9	11	5	5	11	27	31	46	6	4	.						
Absolute Annual Average	3999.7	4359.2	330.6	329.2	136.6	126.6	41.3	38.5	35.6	25.4	20.8	13.0	53.8	12.2	9.2	17.0	32.8	31.0	37.2	52.4	44.2	37.6	27.0	33.2	8.4	12.8	8.8	9.4	4.6	7.0	12.2	21.8	28.8	52.4	7.2	4.0	.						
Average Percentage of Each Cause of Death . . . . .	.	.	.	.	.	.	.	.	10.7	7.7	6.3	3.9	16.3	3.7	2.8	5.2	9.9	9.4	11.2	15.9	13.4	11.4	8.2	10.1	2.5	3.9	2.7	2.9	1.4	2.1	3.7	6.6	8.7	15.9	2.2	1.2	.
1885	4163.0	4526.5	349	349	142	139	40.7	39.8	28	30	27	17	61	14	7	18	36	29	37	48	48	35	30	49	13	16	11	7	1	10	14	23	28	52	8	1	.						
1886	4229.0	4519.5	342	333	136	118	39.8	35.4	25	29	20	16	59	10	8	14	35	38	49	50	47	30	31	39	8	9	9	18	2	13	22	28	49	8	7	.							
1887	4296.0	4550.0	358	326	154	133	43.0	40.8	39	19	18	7	49	17	9	20	46	37	40	52	64	47	37	31	11	10	8	11	2	2	10	23	18	46	7	4	.						
1888	4411.5	4675.0	348	361	133	146	38.2	40.4	30	26	19	13	71	20	8	22	36	33	39	53	39	42	35	49	17	9	14	14	1	15	21	21	52	4	6	.							
1889	4521.0	4809.0	359	333	151	119	42.1	35.7	34	20	19	15	82	23	11	19	53	47	38	40	30	44	20	31	11	10	14	12	1	2	10	28	28	37	8	5	.						
Absolute Annual Average	4324.1	4616.0	351.2	340.4	143.2	131.0	40.8	38.5	31.2	24.8	20.6	13.6	64.4	16.8	8.6	18.6	41.2	36.8	40.6	48.6	45.6	39.6	30.6	39.8	12.0	10.8	11.2	12.4	1.2	3.4	12.4	23.4	24.6	47.2	7.0	4.6	.						
Average Percentage of Each Cause of Death . . . . .	.	.	.	.	.	.	.	.	8.9	7.3	5.9	4.0	18.3	4.9	2.4	5.5	11.7	10.8	11.6	14.3	13.0	11.6	8.7	11.7	3.4	3.2	3.2	3.6	0.3	1.0	3.5	6.9	7.0	13.9	2.0	1.3	.
1890	4609.0	4937.5	416	362	153	144	36.8	39.8	30	23	29	14	90	18	13	21	43	54	34	49	56	56	37	34	9	12	14	10	5	2	19	26	29	42	8	1	.						
1891	4703.0	5085.0	466	462	191	183	41.0	39.6	32	32	18	10	92	28	17	18	57	55	57	71	53	59	50	57	8	15	10	12	1	5	33	48	29	43	9	4	.						
1892	4777.5	5222.5	473	393	166	161	41.4	41.0	24	31	23	26	97	12	14	21	65	47	58	59	61	53	41	49	19	13	14	7	1	3	19	27	24	40	13	5	.						
1893	4871.0	5320.5	458	409	194	148	42.4	36.2	24	30	33	22	104	22	19	22	53	58	62	51	45	50	35	44	8	18	13	6	1	1	26	27	30	54	5	4	.						
1894	5039.5	5448.0	416	402	174	168	41.8	41.8	22	34	22	15	97	18	11	30	57	62	52	59	48	40	44	51	13	18	12	14	1	2	9	28	16	39	12	2	.						
Absolute Annual Average	4800.0	5202.7	445.8	405.6	181.6	160.8	40.7	39.6	26.4	23.0	25.0	17.4	96.0	19.6	14.8	22.4	55.0	55.2	52.6	57.8	52.6	51.6	41.4	47.0	11.4	15.2	12.6	9.8	1.8	2.6	21.2	31.2	25.6	44.6	9.4	3.2	.						
Average Percentage of Each Cause of Death . . . . .	.	.	.	.	.	.	.	.	5.9	6.9	5.6	4.3	21.5	4.8	3.3	5.5	12.3	13.6	11.8	14.3	11.8	12.7	9.3	11.6	2.6	3.7	2.8	2.4	0.4	0.6	4.8	7.7	5.7	11.0	2.1	0.8	.
1895	5252.6	5664.0	490	449	213	180	43.5	40.1	26	41	37	15	103	16	12	30	44	46	68	55	58	62	42	57	19	15	7	13	1	6	30	38	35	50	8	4	.						

APPENDIX A—TABLE XI.

The Statistics of Pauper Lunatics in Private Dwellings for Thirty-eight Years, 1858-95.

YEARS.	ADMITTED TO ROLL OF PATIENTS IN PRIVATE DWELLINGS.						CEASED TO BE PATIENTS IN PRIVATE DWELLINGS.										Died.			On Roll at 31st December of each year.						Percentage of Recoveries on Admissions.						Percentage of Deaths on the Numbers at 31st December of each year.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	Intimated by Inspectors of Poor.		Transferred from Asylums.		Total.		Recovered.		Removed from Roll by Friends.				Transferred to Asylums.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
																	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
During 1858.....	153	237	390	6	8	14	161	243	404	18	13	31	11	16	27	31	56	87	838	1039	1877	11	5	8	4	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5

The Number of Pauper Lunatics belonging to each County who were placed on the Register and sent to Asylums or other Establishments,* or left in Private Dwellings in each year from 1860 to 1895.

Populations for 1891.	SCOTLAND. 4,025,647	Aberdeen. 284,086	Argyll. 74,398	Ayr. 226,886	Banff. 61,684	Berwick. 29,290	Bute. 18,404	Caitness. 87,177	Clackmannan. 33,140	Dumfries. 74,245	Edinburgh. 423,894	Elgin. 43,471	Fife. 180,865	Forfar. 277,735	Glasgow. 87,377	Inverness. 89,847	Kincardine. 25,492	Kilbride. 6,673	Kirkcaldy. 29,868	Leith. 1,000,044	Linlithgow. 63,632	Nairn. 8,816	Orkney. 30,453	Perth. 14,750	Perth. 122,155	Renfrew. 245,067	Ross. 75,727	Shetland. 63,800	Shetland. 27,270	Shetland. 28,711	Stirling. 118,021	Sutherland. 21,896	Wigtown. 36,062																																						
Ways in which the Patients were provided for	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.	Sent to Asylums.	Left in Private Dwellings.																																					
1860	1018	135	82	9	10	9	43	8	11	8	9	2	10	...	5	14	8	1	17	2	19	3	173	4	17	3	40	8	72	6	11	3	17	6	17	...	8	...	19	1	230	7	13	...	1	...	3	2	4	1	40	8	72	2	13	19	13	2	4	...	1	...	34	2	6	1	2	8	3		
Absolute Annual Average of the 5 Years 1860-1864	989.0	110.4	80.6	6.8	18.2	7.2	43.0	5.2	11.0	2.2	8.6	1.4	5.8	0.6	7.4	6.2	4.0	1.8	14.8	0.8	23.2	2.6	146.6	4.2	14.0	2.0	35.0	3.3	74.8	3.6	10.4	1.2	12.2	6.4	12.4	0.6	10	...	14.2	18	244.9	11.4	10.8	1.0	18	...	4.0	2.8	5.0	0.2	42.2	8.0	70.0	1.4	5.8	9.6	15.0	6.0	2.8	0.8	3.4	2.6	25.2	3.4	4.6	1.6	9.0	3.2			
Annual Average per 100,000 of Population (calculated on Populations of 1861)	32	4	3	23	9	22	3	19	2	4	36	4	36	4	18	15	17	8	27	1	31	3	53	2	32	5	28	3	73	3	10	1	12	7	36	2	14	...	33	3	34	8	2	28	3	22	...	12	9	44	2	32	6	41	1	12	12	23	11	29	8	11	8	28	4	19	7	21	8		
Absolute Annual Average of the 5 Years 1865-1869	1210.0	108.6	92.0	8.0	23.4	8.0	56.8	9.2	16.2	4.2	8.6	1.6	4.0	0.8	8.6	4.6	5.0	0.8	17.2	0.8	29.6	3.0	175.6	5.2	13.2	2.2	44.8	3.4	97.0	5.8	15.2	2.4	26.2	6.8	11.0	1.8	3.6	0.2	11.0	2.0	321.0	6.6	11.6	0.6	24	...	0.8	2.4	1.4	2.6	0.8	43.6	6.6	89.8	2.2	1.7	6.4	14.0	1.4	3.2	0.4	3.0	3.8	28.4	0.4	4.6	2.2	9.4	3.8		
Annual Average per 100,000 of Population (calculated on the Mean of 1861-61)	38	3	3	38	10	28	5	16	7	24	4	24	5	21	11	21	3	30	1	39	4	58	2	30	5	23	2	58	4	10	1	10	4	6	30	3	50	3	28	5	46	1	29	1	26	9	8	4	22	7	38	6	41	1	12	12	23	11	29	8	11	8	28	4	19	7	21	8			
1870	1345	69	106	7	84	3	71	8	22	9	8	1	5	...	13	8	9	...	17	1	88	1	130	4	15	...	47	1	88	1	16	...	28	...	9	...	2	...	9	4	360	2	11	...	1	...	1	1	4	...	44	6	104	3	25	8	21	1	8	...	2	2	32	5	4	1	9	2			
1871	1341	74	101	10	98	3	64	2	18	2	8	1	8	1	1	5	10	...	23	1	17	2	179	4	16	...	41	1	81	4	16	...	32	...	7	...	8	18	1	...	1	8	2	360	4	11	...	1	...	4	2	8	1	61	2	119	2	20	7	16	...	9	...	8	6	39	...	4	1	10	...
1872	1445	68	87	9	89	8	60	4	20	1	10	8	6	...	9	...	11	2	18	...	85	1	187	4	16	...	59	...	110	4	8	...	40	...	3	15	2	...	14	4	392	3	13	...	1	1	3	2	1	...	42	1	134	2	28	6	28	...	2	...	4	1	37	4	4	1	13	2			
1873	1009	57	91	8	46	4	98	5	4	1	6	1	16	...	4	3	4	...	26	...	28	1	181	4	20	...	69	3	115	...	17	...	1	86	1	10	1	2	...	13	...	491	3	15	1	2	...	5	3	6	...	68	6	114	...	29	3	23	...	7	...	8	...	30	1	2	...	13	2		
1874	1679	60	116	6	40	2	83	1	27	1	12	2	10	...	11	1	11	1	24	...	33	...	305	7	30	...	66	3	115	...	20	...	35	4	12	...	3	...	13	1	496	5	17	...	3	...	4	3	5	...	60	1	97	2	37	4	17	...	4	...	5	3	44	3	7	2	9	2			
Absolute Annual Average	1465.8	65.6	100.0	7.8	37.4	4.0	77.0	3.0	18.2	1.4	8.8	1.6	9.0	0.2	7.6	3.4	9.0	0.6	23.6	0.4	29.6	1.0	189.0	4.6	16.8	1.6	54.4	2.0	104.0	2.2	14.6	0.2	33.2	11.8	1.2	0.8	11.4	2.2	405.8	3.4	13.4	0.2	1.6	...	0.2	6.0	...	54	2.4	40.4	2.2	4.2	1.0	10.8	1.8																
Annual Average per 100,000 of Population (calculated on the Populations of 1871)	41	2	4	3	49	5	38	1	30	2	24	4	53	1	19	8	34	2	39	1	40	1	50	1	38	1	44	4	34	3	10	1	38	4	34	3	19	12	47	5	52	...	32	...	19	2	11	7	39	2	40	3	58	1	34	7	39	...	45	...	17	8	43	2	18	4	28	4			
1875	1693	138	109	8	48	4	91	4	26	8	9	5	7	2	16	4	14	...	34	...	29	7	900	11	22	...	44	4	122	...	16	...	2	37	12	15	1	3	...	17	...	450	6	18	1	2	...	6	6	4	...	71	15	115	2	40	9	31	1	6	...	9	5	47	3	11	4	15	4		
1876	1807	132	109	8	60	10	98	4	10	6	8	...	9	...	16	4	6	...	27	1	28	4	950	6	20	...	58	3	120	...	18	...	3	185	13	7	2	2	...	13	1	608	2	24	2	8	...	2	11	2	...	50	9	125	...	40	13	16	...	4	1	8	4	49	3	7	4	10	1		
1877	1894	90	127	3	45	3	96	3	22	4	16	4	6	...	11	10	13	1	27	1	35	1	921	5	24	3	74	3	127	6	14	...	25	9	14	1	...	13	...	678	8	10	...	8	...	12	4	7	...	50	8	134	...	38	7	10	...	8	...	7	1	60	1	7	4	10	1				
1878	1841	111	118	8	40	1	103	7	17	4	18	2	13	8	9	6	9	...	28	3	27	3	956	3	20	...	60	3	120	...	12	...	29	10	11	...	1	...	8	1	671	13	15	...	4	1	10	3	7	...	74	5	115	...	84	9	16	1	8	...	11	7	56	4	6	4	13	1			
1879	1800	93	123	6	80	2	100	6	14	4	14	1	12	8	11	8	13	1	30	...	42	3	929	6	20	...	64	6	129	3	12	...	29	10	12	8	1	...	12	1	488	19	20	...	3	...	9	...	65	3	115	3	35	9	16	...	8	...	12	6	...	1	7	...	12	2					
Absolute Annual Average	1811.0	112.8	117.2	5.8	47.4	4.4	97.4	4.6	19.6	4.8	12.8	2.4	9.4	1.6	12.6	7.4	10.8	0.8	28.6	1.0	33.0	3.4	235.2	6.2	21.2	5.4	58.8	3.8	133.2	3.4	16.4	0.8	31.2	11.0	11.0	1.0	2.2	...	12.6	0.6	531.2	10.0	18.2	0.6	3.8	0.2	7.8	4.8	5.2	...	68.6	8.0	120.8	1.0	34.2	9.4	20.2	0.4	5.8	0.2	9.4	4.4	54.4	2.4	7.6	3.2	13.2	1.8			
Annual Average per 100,000 of Population (calculated on the Mean of 1871-81)	51	3	4	2	62	6	47	2	32	8	36	7	54	9	31	18	39	3	41	1	44	5	66	2	48	12	35	2	53	1	43	2	35	12	31	3	35	...	30	1	61	1	43	1	44	2	25	15	40	...	54	6	57	...	42	12	35	1	36	1	31	14	34	3	14	3	5				
1880	1970	144	122	15	60	3	102	6	31	5	8	9	...	17	7	13	...	85	...	24	3	969	12	25	...	83	3	78	2	158	7	11	...	2	69	16	19	1	2	...	16	1	831	20	24	1	8	...	13	4	4	...	65	8	151	...	45	10	29	1	6	...	7	6	53	1	30	8	13	1	
1881	2089	133	139	8	62	6	97	1	30	4	16	2	13	1	10	7	10	...	83	1	41	2	253	7	16	4	76	5	178	4	30	1	51	18	17	...	5	...	23	9	665	13	27	...	10	...	14	5	5	...	72	12	146	2	80	13	27	1	9	...	9	6	54	1	6	5	17	2			
1882	1932	134	140	8	62	4	103	9	19	2	8	2	10	...	12	6	13	1	36	...	88	4	331	6	23	2	79	5	141	6	29	1	46	20	12	2	1	15	...	539	18	24	1	6	...	11	5	5	...	67	9	131	2	28	3	24	...	9	...	6	7	51	2	12	2	11	4				
1883	2089	142	123	8	61	9	111	3	22	9	16	1	8	1	19	8	13	1	36	2	32	2	275	14	23	...	67	3	174	4	31	2	46	18	18	...	9	...	16	1	671	18	24	1	8	...	10	2	2	...	74	9	126	1	38	12	36	...	12	...	19	7	67	4	10	...	11	2			
1884	2043	92	127	6	80	3	111	1	28	...	19	1	8	...	16	6	13	1	36	...	85	...	921	11	30	...	82	2	165	4	23	...	41	17	14	...	6	...	12	...	608	9	18	2	8	...	11	3	6	...	65	4																			

The Number of Pauper Lunatics belonging to each County who were transferred from Private Dwellings to Establishments or from Establishments to Private Dwellings in each Year from 1860 to 1895.



The Number of Pauper Lunatics chargeable to each County who were resident in Establishments* or in Private Dwellings respectively on 1st January of each Year from 1861 to 1896

* Inmates of Schools for Imbeciles are not included in this Table.

TABLE showing the Number of Private and Pauper Lunatics of each Sex in each Royal and District Asylum, Parochial Asylum, and Licensed Poorhouse in Scotland, on 1st January 1896; and the Number of Pauper Lunatics from each County in each Public Asylum, Private Asylum, Parochial Asylum or Poorhouse.

[illegible]

Return showing the Number of Pauper Lunatics of each Sex chargeable to each County in Scotland on 1st January 1896, and the manner of their disposal.

COUNTIES.	Population in 1891.	DISPOSAL OF PAUPER LUNATICS.														
		Number of Pauper Lunatics at 1st January 1896.			In Establishments.						In Private Dwellings and under sanction of the Board.					
					In Asylums and in Wards of Poorhouses with Unrestricted Licences.			In Wards of Poorhouses with Restricted Licences.			With Relatives.			With Strangers and Alone.		
M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.		
1. Aberdeen,	284,036	373	477	850	209	289	498	103	99	202	24	37	61	37	52	89
2. Argyll,	74,998	213	212	425	167	155	322	48	52	100	21	29	49	25	54	89
3. Argyll,	226,386	284	342	626	205	238	443	48	52	100	12	26	38	19	26	45
4. Banff,	61,684	94	115	209	70	69	139	...	...	...	14	17	31	10	29	39
5. Berwick,	32,290	45	61	106	35	42	77	...	...	...	5	8	13	5	11	16
6. Bute,	18,404	35	47	82	25	30	55	...	...	...	2	3	5	8	14	22
7. Caithness,	37,177	81	94	175	49	51	100	...	...	...	26	31	57	6	12	18
8. Clackmannan,	33,140	33	36	69	28	28	56	3	2	5	...	2	2	2	4	6
9. Dunbarton,	98,014	79	113	192	53	74	127	24	28	52	...	2	2	2	9	11
10. Dumfries,	74,245	89	98	187	74	88	162	...	...	...	6	4	10	9	6	15
11. Edinburgh— Urban Dist.,	433,994	{ 404	511	915	222	262	484	43	44	87	16	22	38	123	183	306
Mid-Lothian Dist.,		97	106	203	83	80	163	5	3	8	4	6	10	5	7	22
Elgin (or Moray),	43,471	82	111	193	68	87	155	...	...	...	7	12	19	7	12	19
13. Fife,	190,365	232	303	535	193	237	430	...	...	...	12	20	32	27	46	73
14. Forfar,	277,785	392	559	951	242	341	583	87	92	179	14	23	37	49	103	152
15. Haddington,	37,377	72	86	158	55	69	124	7	10	17	6	6	12	4	1	5
16. Inverness,	89,847	219	235	454	124	97	221	...	...	...	65	85	150	30	53	83
17. Kincaidine,	35,492	37	46	83	27	32	59	7	11	18	1	1	2	2	2	4
18. Kinross,	6,673	8	18	26	7	14	21	...	...	...	...	7	12	1	2	3
19. Kirkcubright,	39,985	50	56	106	43	47	90	...	...	...	...	5	7	2	2	4
20. Lanark,	1,091,644	1,276	1,371	2,647	1,047	1,017	2,064	44	48	92	37	56	93	148	250	398
21. Linlithgow,	53,532	60	63	123	42	46	88	12	8	20	2	2	3	2	2	4
22. Nairn,	8,516	21	14	35	18	9	27	...	...	...	1	1	1	1	1	1
23. Orkney,	30,453	46	71	117	29	47	76	...	...	...	...	18	28	7	6	13
24. Peebles,	14,750	12	24	36	12	22	34	...	...	...	...	13	32	...	...	...
25. Perth,	122,185	249	219	468	168	155	323	16	14	30	...	19	32	46	37	83
26. Renfrew,	245,067	255	298	553	217	244	461	...	...	...	2	6	8	36	48	84
27. Ross and Cromarty,	78,727	176	179	355	84	97	181	...	...	...	70	64	134	22	18	40
28. Roxburgh,	53,500	52	77	129	45	65	110	...	...	...	5	8	13	2	4	6
29. Selkirk,	27,270	25	23	48	21	20	41	...	...	...	4	2	6	...	...	...
30. Shetland,	28,711	58	61	119	31	33	64	1	...	...	17	20	37	9	8	17
31. Stirling,	118,021	142	144	286	126	108	234	3	6	9	3	6	9	10	24	34
32. Sutherland,	21,896	36	48	84	20	25	45	1	...	...	13	17	30	2	6	8
33. Wigtown,	36,062	55	57	112	28	31	59	11	9	20	13	10	23	3	7	10
Total,	4,025,647	5,382	6,275	11,657	3,867	4,249	8,116	415	426	841	436	573	1,009	664	1,027	1,691

APPENDIX A.—TABLE XVII.

The Manner in which the Pauper Lunatics chargeable to each County, placed on the Register during 1895, were disposed of, and the Changes that have taken place during the year in the Disposal of those on the Register on 1st January of that year.

COUNTIES.	No. of Pauper Lunatics at 1st January 1895.				Number Intimated during the Year 1895.		A. Disposal of Establishment Patients.*						B. Disposal of Single Patients.							
	In Private Dwellings as Single Patients.						Placed in Establishments.*		Discharged from Establishments.		Died.	Exempted from Removal of Single Patients Intimated.	Transferred from Establishments.	Removed from Jurisdiction of Board.		Died.				
	In Establishments.				Of Patients Intimated during 1895.		Of Single Patients transferred.		Recovered.	Removed from Poor-Roll.				By Recovery.	By Friends.					
	M.	F.	M.	F.	M.	F.	M.	F.			M.	F.	M.			F.	M.	F.	M.	F.
1. Aberdeen	292	385	58	87	67	77	66	77	14	48	25	1	7	11	1	1	F. 7			
2. Argyll	175	142	46	59	30	30	29	27	16	11	18	6	1	3	2	2	M. 2			
3. Ayr	247	286	30	53	76	75	75	72	33	25	19	35	1	5	1	1	F. 3			
4. Banff	73	76	23	45	10	14	8	9	6	9	6	8	2	1	1	1	F. 3			
5. Berwick	36	41	11	21	5	7	5	6	1	3	2	2	2	1	1	1	F. 2			
6. Bute	26	35	10	14	5	5	5	5	1	3	4	4	2	1	1	1	F. 3			
7. Caithness	44	48	34	45	11	8	9	7	3	3	3	3	2	2	1	1	F. 3			
8. Clackmannan	30	31	2	4	6	7	22	30	4	1	6	10	1	1	1	1	F. 3			
9. Dumfries	73	97	3	11	22	30	22	22	9	13	4	1	1	1	1	1	F. 3			
10. Dundee	73	77	16	12	23	23	22	22	12	7	6	5	1	1	1	1	F. 3			
11. Edinburgh—	293	301	134	208	117	132	113	128	61	59	42	4	18	16	2	1	F. 15			
Urban District	91	81	9	21	30	29	29	28	18	10	33	4	3	5	1	3	M. 10			
Midlothian	63	89	16	27	20	25	18	22	8	12	10	2	3	1	1	1	M. 15			
12. Elgin	197	226	33	66	41	64	38	61	21	3	20	19	3	3	1	1	M. 2			
13. Fife	323	434	65	119	97	96	96	92	26	39	14	10	43	36	1	1	M. 5			
14. Forfar	61	69	8	10	21	16	20	16	9	6	8	1	4	10	15	1	M. 5			
15. Haddington	125	110	92	126	39	43	34	29	21	27	4	1	7	5	1	1	M. 2			
16. Inverness	40	43	3	3	6	10	6	10	3	4	7	5	1	5	1	1	M. 7			
17. Kinross	8	11	2	3	2	6	2	6	2	3	2	1	1	1	1	1	M. 1			
18. Kirkcubright	41	46	8	10	9	11	8	11	3	3	4	1	1	1	1	1	M. 1			
19. Kirkcaldy	1052	1021	176	298	335	360	322	344	136	156	105	13	9	29	3	2	M. 1			
20. Leith	57	53	6	8	9	8	9	8	6	7	4	2	1	1	1	1	M. 14			
21. Linlithgow	29	40	3	4	12	4	11	3	3	4	1	1	1	1	1	1	M. 2			
22. Nairn	29	47	17	26	5	7	3	6	3	6	1	1	1	1	1	1	M. 2			
23. Orkney	180	19	4	1	3	1	3	1	1	1	1	1	1	1	1	1	M. 2			
24. Peebles	168	64	51	29	43	38	41	3	17	21	11	14	1	2	3	1	M. 3			
25. Perth	219	241	41	57	92	77	92	77	60	44	10	7	23	3	5	1	M. 3			
26. Renfrew	77	95	85	6	17	29	3	3	6	19	9	8	6	5	1	1	M. 3			
27. Ross & Cromarty	54	58	6	10	13	16	12	15	8	9	2	2	2	2	1	1	M. 8			
28. Roxburgh	27	31	11	6	8	6	8	6	1	6	2	2	2	2	1	1	M. 1			
29. Selkirk	21	19	4	7	5	8	5	5	2	1	3	2	3	1	1	1	M. 1			
30. Shetland	27	36	23	31	11	11	4	6	1	6	3	2	3	1	1	1	M. 3			
31. Stirling	130	113	11	32	48	47	46	46	1	22	18	16	1	2	1	1	M. 3			
32. Sutherland	26	24	16	24	6	5	4	4	6	3	1	1	1	1	1	1	M. 2			
33. Wigtown	39	43	18	19	7	6	7	6	4	7	3	2	1	1	1	1	M. 1			
TOTALS	4241	4575	1073	1604	1245	1333	1189	1259	550	614	424	56	74	83	104	15	F. 99			

* Inmates of Schools for Imbeciles are not included in this Table.

APPENDIX A.—TABLE XVIII.

Proportion for each County per 100,000 of Population, of Pauper Lunatics annually placed on the Register in the Years 1886 to 1895, also of those at 1st January 1896 in Asylums, Lunatic Wards of Poorhouses, and in Private Dwellings, and the Proportions of Registered Paupers of all classes.

COUNTIES.	Proportion per 100,000 of Population.*								
	Average number intimated as Pauper Lunatics during the years 1886-95.			Total number of Pauper Lunatics at 1st Jan. 1896.	Pauper Lunatics in Establishments 1st January 1896.			Pauper Lunatics in Private Dwellings at 1st Jan. 1896.	
	Sent to Asylums.	Left in Private Dwellings.	Total.		In Asylums and in Wards of Poorhouses with Unrestricted Licences.	In Wards of Poorhouses with Restricted Licences.	Total in Establishments.		
1. Aberdeen, . .	45	2	47	299	175	71	246	53	1515
2. Argyll, . . .	73	7	80	567	429	...	429	137	2347
3. Ayr,	54	2	56	277	196	44	240	37	1529
4. Banff, . . .	46	6	52	339	225	...	225	113	1937
5. Berwick, . .	36	7	43	328	238	...	238	90	1548
6. Bute,	60	3	63	446	299	...	299	147	1407
7. Caithness, .	39	19	58	471	269	...	269	202	3185
8. Clackmannan,	39	1	40	208	169	15	184	24	797
9. Dumbarton, .	40	...	40	196	130	53	183	13	1105
10. Dumfries, . .	45	1	46	252	218	...	218	34	1410
11. Edinburgh, .	65	2	67	258	149	22	171	87	1296
12. Elgin, . . .	66	7	73	444	357	...	357	87	2521
13. Fife,	44	2	46	281	226	...	226	55	1216
14. Forfar, . . .	59	2	61	342	210	65	275	68	1455
15. Haddington, .	71	3	74	423	332	45	377	45	1811
16. Inverness, .	65	18	83	505	246	...	246	259	2863
17. Kincardine, .	42	...	42	234	166	51	217	17	1144
18. Kinross, . .	63	4	67	390	315	...	315	75	1544
19. Kirkcudbright,	43	2	45	265	225	...	225	40	1841
20. Lanark, . . .	58	1	59	242	188	8	196	45	1381
21. Linlithgow, .	48	2	50	230	164	37	201	28	1267
22. Nairn, . . .	89	7	96	411	317	...	317	94	2337
23. Orkney, . . .	40	10	50	384	250	...	250	135	2177
24. Peebles, . .	32	1	33	244	231	...	231	14	983
25. Perth, . . .	57	4	61	383	264	25	289	94	1480
26. Renfrew, . .	63	...	63	226	188	...	188	38	1412
27. Ross and Cromarty, }	51	19	70	451	221	...	221	221	3198
28. Roxburgh, . .	48	3	51	241	206	...	206	36	1157
29. Selkirk, . . .	31	3	34	176	150	...	150	26	928
30. Shetland, . .	51	15	66	414	223	3	226	188	3002
31. Stirling, . . .	54	2	56	242	198	8	206	36	1369
32. Sutherland, .	55	9	64	384	206	5	211	174	3453
33. Wigtown, . .	43	5	48	311	166	55	221	92	2146
SCOTLAND, . .	55	3	58	290	202	21	223	67	1541

* Calculated on Populations of 1891.

APPENDIX A.—TABLE XIX.

Return exhibiting the Number of Orders granted by the Sheriffs for Admission of Lunatics into any Public, Private, District, or Parochial Asylum or House, to which such Order was sent, during the Year ended 31st December 1895.

Orders granted by the Sheriffs of the County of	For the Admission of Patients into the Asylum or House of	No. of Orders Granted.	Total.
1. Aberdeen	Royal Asylum, Aberdeen Do. Montrose	178 2	180
2. Argyll	Crichton Royal Institution, Dumfries Royal Asylum, Glasgow District Asylum, Argyll	1 1 57	59
3. Ayr	Crichton Royal Institution, Dumfries District Asylum, Ayr	1 146	147
4. Banff	District Asylum, Banff	24	24
5. Berwick	District Asylum, Haddington Do. Roxburgh	1 5	6
6. Bute	District Asylum, Argyll Parochial Asylum, Greenock	12 1	13
7. Caithness	Royal Asylum, Edinburgh Do. Montrose	1 10	11
8. Clackmannan	Murray's Royal Asylum, Perth District Asylum, Stirling	1 7	8
9. Dumbarton	Crichton Royal Institution, Dumfries Royal Asylum, Glasgow District Asylum, Stirling Private Asylum, Westernmains Barony Parochial Asylum	2 4 30 1 1	38
10. Dumfries	Crichton Royal Institution, Dumfries	187	187
11. Edinburgh	Royal Asylum, Edinburgh District Asylum, Mid-Lothian Private Asylum, Mavisbank Do. Mollendo House Do. Saughton Hall	372 63 13 1 16	465
12. Elgin	District Asylum, Elgin	52	52
13. Fife	Royal Asylum, Dundee Murray's Royal Asylum, Perth District Asylum, Fife	1 2 96	99
14. Forfar	Royal Asylum, Dundee Do. Montrose	163 70	233
15. Haddington	District Asylum, Haddington	41	41
16. Inverness	District Asylum, Inverness	75	75

APPENDIX A.—TABLE XIX.—*continued.*

Orders granted by the Sheriffs of the County of	For the Admission of Patients into the Asylum or House of	No. of Orders Granted.	Total.
17. Kincardine . . .	Royal Asylum, Montrose	8	8
18. Kinross . . .	District Asylum, Fife	9	
19. Kirkcudbright . . .	Crichton Royal Institution, Dumfries	10	10
20. Lanark . . .	Crichton Royal Institution, Dumfries	17	
	Royal Asylum, Edinburgh	2	716
	Do. Glasgow	108	
	Murray's Royal Asylum, Perth	3	
	District Asylum, Ayr	1	
	Kirklands Asylum, Bothwell	60	
	District Asylum, Lanark	94	
	Do. Mid-Lothian	1	
	Do. Stirling	3	
	Private Asylum, Westernmains	1	
	Barony Parochial Asylum	313	
	Glasgow Do.	45	
	Govan Do.	68	
21. Linlithgow . . .	District Asylum, Stirling	12	12
22. Nairn . . .	Murray's Royal Asylum, Perth	1	13
	District Asylum, Inverness	12	
23. Orkney . . .	Royal Asylum, Edinburgh	7	9
	Do. Montrose	1	
	District Asylum, Banff	1	5
24. Peebles . . .	District Asylum, Mid-Lothian	5	
25. Perth . . .	Royal Asylum, Dundee	1	111
	Murray's Royal Asylum, Perth	27	
	District Asylum, Perth	83	
26. Renfrew . . .	Crichton Royal Institution, Dumfries	4	234
	Royal Asylum, Glasgow	6	
	Greenock Parochial Asylum	106	
	Paisley Do. (Craw Road)	41	
	Do. Do. (Riccartbar)	77	
27. Ross . . .	Royal Asylum, Aberdeen	1	39
	Murray's Royal Asylum, Perth	1	
	District Asylum, Inverness	37	
28. Roxburgh . . .	District Asylum, Roxburgh	43	43
29. Selkirk . . .	District Asylum, Roxburgh	6	
30. Shetland . . .	Royal Asylum, Montrose	13	13
31. Stirling . . .	Royal Asylum, Glasgow	1	
	District Asylum, Perth	1	132
	Do. Stirling	130	
32. Sutherland . . .	District Asylum, Inverness	5	5
33. Wigtown . . .	Crichton Royal Institution, Dumfries	14	
	TOTAL,		3,017

APPENDIX A.—TABLE XX.

Return exhibiting the Number of Licences granted by the General Board of Commissioners in Lunacy for Scotland, for the Continuance, Establishment, or Renewal of Charitable Institutions, Private Asylums, and Lunatic Wards of Poorhouses, and the Transfer of any such Licence from any one Asylum to another, during the year ended 31st December 1895.

Name.	Number of Licences granted for Continuance or Renewal.	Number of Licences granted for Establishment.	Number of Licences Transferred.	Total.
1. Charitable Institutions . . .	2	...	...	2
2. Private Asylums	5	...	...	5
3. Lunatic Wards of Poorhouses . .	21	...	...	21
TOTAL	28	...	...	28

APPENDIX A.—TABLE XXI.

Average Number of Patients Resident, and the Results of Treatment in each Asylum or other Establishment, for the Year 1895.

(a) *Royal and District Asylums.*

ROYAL AND DISTRICT ASYLUMS.	Average Number Resident.		Admissions (including Transfers).		Recoveries.		Discharges not Recovered (including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Aberdeen Royal Asylum, { Private patients, { Pauper do. { Total,	115.5	125.0	21	30	7	15	5	10	5	5	33.3	50.0	8.7	4.0
2. Argyll District Asylum,	202.5	284.5	72	72	16	43	16	24	11	19	22.2	59.7	11.9	3.9
3. Ayr District Asylum,	318.0	409.5	93	102	23	38	22	34	16	16	24.7	56.9	10.7	3.9
4. Banff District Asylum,	211.5	301.0	35	40	17	17	6	15	9	31	48.6	42.5	9.9	5.0
5. Crichton Royal Institution, Dumfries,	201.0	226.0	82	76	29	23	29	19	16	32	35.4	30.3	8.0	13.6
6. Dundee Royal Asylum, { Private patients, { Pauper do. { Total,	71.5	135.0	12	17	5	9	3	5	9	41.7	52.9	7.0	12.0	7.4
7. Edinburgh Royal Asylum, { Private patients, { Pauper do. { Total,	182.0	189.5	64	52	23	23	69	86	28	35.9	44.2	6.6	8.9	8.9
8. Elgin District Asylum,	281.5	67	70	29	36	69	86	28	25	43.3	51.4	9.8	8.9	8.9
9. Fife District Asylum,	466.5	471.0	131	122	52	59	78	96	40	39	39.7	48.4	8.6	8.3
10. Glasgow Royal Asylum, { Private patients, { Pauper do. { Total,	41.0	45.0	13	18	4	1	7	6	5	1	30.8	5.6	12.2	2.2
11. Govan District Asylum,	131.5	208.5	65	77	13	31	30	22	20	20	20.0	40.3	15.2	10.6
12. Haddington District Asylum,	172.5	253.5	78	95	17	32	37	29	23	23	21.8	33.7	14.5	9.1
13. Inverness District Asylum,	184.5	174.0	36	54	19	19	8	11	13	13	52.8	35.2	7.0	7.5
14. Kirklands Asylum at Bothwell, { Private patients, { Pauper do. { Total,	246.5	269.0	144	164	64	65	61	59	41	29	44.4	39.6	16.6	10.8
15. Lanark District Asylum,	431.0	443.0	180	218	83	84	69	70	54	42	46.1	38.5	12.5	9.5
16. Mid-Lothian District Asylum,	66.0	89.5	24	30	10	14	4	6	6	11	41.7	46.7	9.1	12.3
17. Montrose Royal Asylum, { Private patients, { Pauper do. { Total,	202.0	243.5	68	23	21	9	17	22	19	46.0	30.9	10.9	7.8	7.8
18. Murray's Royal Asylum, Perth,	172.0	195.0	55	71	23	25	29	15	12	10	41.8	35.2	7.0	5.1
19. Perth District Asylum,	65.5	27.5	...	...	...	...	40	17	2	2	...	...	3.1	7.3
20. Roxburgh District Asylum,	237.5	222.5	55	71	23	26	69	32	14	12	41.8	36.6	5.9	5.4
21. Stirling District Asylum,	28.0	14.5	28	35	...	...	...	...	...	...	...	...	...	...
22. Tulliallan District Asylum,	61.0	73.0	22	23	9	6	2	3	9	2	40.9	26.1	14.8	2.7
23. Inverness District Asylum,	242.5	230.0	74	72	32	45	18	12	11	21	43.2	62.5	4.5	9.1
24. Kirklands Asylum at Bothwell,	117.5	96.0	33	29	14	11	37	11	11	7	42.4	37.9	9.4	7.3
25. Lanark District Asylum,	1173.0	1280	448	179	13	9	6	5	12	...	5.2	5.0	6.9	...
26. Mid-Lothian District Asylum,	114.0	125.0	42	43	20	16	14	15	12	8	47.6	37.2	10.5	6.4
27. Montrose Royal Asylum, { Private patients, { Pauper do. { Total,	38.0	50.5	8	8	3	2	2	5	3	2	37.5	25.0	7.9	4.0
28. Murray's Royal Asylum, Perth,	227.5	277.0	64	39	19	18	12	6	30	11	29.7	46.2	13.2	4.0
29. Perth District Asylum,	265.5	327.5	72	47	22	20	14	11	33	13	30.6	42.6	12.4	4.0
30. Roxburgh District Asylum,	53.5	51.0	19	20	6	8	6	9	2	1	31.6	40.0	3.7	2.0
31. Stirling District Asylum,	165.0	153.0	45	45	18	92	13	6	10	13	40.0	48.9	6.1	8.5
32. Perth District Asylum,	116.5	130.0	22	35	15	17	5	7	14	5	65.2	48.6	12.0	3.8
33. Stirling District Asylum,	278.0	281.5	88	108	43	47	26	24	29	30	48.9	43.5	10.4	10.7
GENERAL RESULTS,	3992.0	4254.0	1434	1475	474	544	467	395	380	313	33.0	36.9	9.5	7.4

* Average of 11 months.

† Average of 8 months.

APPENDIX A.—TABLE XXI.—*continued.*

Average Number of Patients Resident, and the Results of Treatment in each Asylum or other Establishment, for the Year 1895.

(b) *Private Asylums.*

PRIVATE ASYLUMS.	Average Number Resident.		Admissions (including Transfers).		Recoveries.		Discharges not Recovered (including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Mavisbank,.....	22·0	24·0	5	9	...	1	6	2	3	2	...	11·1	13·6	8·3
2. Mollendo House,.....	2·5	10·0	1	...	...	...	...	1	...	1	...	...	...	10·0
3. Saughton Hall,.....	30·0	33·0	8	10	4	3	5	2	3	5	50·0	30·0	10·0	15·2
4. Westermains,.....	2·0	11·5	...	2	...	1	...	2	...	...	...	50·0	...	...
5. Whitehouse,.....	4·0	9·0	...	...	...	...	...	...	...	2	...	...	...	22·2
GENERAL RESULTS,...	60·5	87·5	14	21	4	5	11	7	6	10	28·6	23·8	9·9	11·4

(c) *Parochial Asylums.*

(Lunatic Wards of Poorhouses with Unrestricted Licences.)

PAROCHIAL ASYLUMS.	Average Number Resident.		Admissions (including Transfers).		Recoveries.		Discharges not Recovered (including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Barony, Woodilee,	348·5	374·0	172	176	72	84	78	54	41	44	41·9	47·7	11·8	11·8
2. City, Glasgow, ....	...	119·5	...	55	...	24	...	15	...	15	...	43·6	...	12·6
3. Govan, Glasgow, ..	124·0	110·5	39	37	16	15	36	45	13	12	41·0	40·5	10·5	10·9
4. Greenock,	153·0	130·0	60	50	28	23	32	25	14	10	46·7	46·0	9·2	7·7
5. Paisley, Craw Rd.	49·0	53·5	27	21	16	6	4	10	7	4	59·3	28·6	14·3	7·5
6. „ Riccartbar	108·0	100·0	52	42	30	19	18	12	10	11	57·7	45·2	9·3	11·0
GENERAL RESULTS,	782·5	887·5	350	381	162	171	168	161	85	96	46·3	44·9	10·9	10·8

APPENDIX A.—TABLE XXI.—*continued.*

Average Number of Patients Resident, and the Results of Treatment in each Asylum or other Establishment, for the Year 1895.

(d) *Lunatic Wards of Poorhouses with Restricted Licences.*

LUNATIC WARDS OF POORHOUSES.	Average Number Resident.		Admissions (Including Transfers).		Recoveries.		Discharges not Recovered (Including Transfers).		Deaths.		Proportion of Recoveries per cent. on Admissions.		Proportion of Deaths per cent. on Average Number Resident.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1. Aberdeen (East),.....	42·5	45·5	5	4	1	1	4	6	1	2	20·0	25·0	2·4	4·4
2. Aberdeen (West),.....	26·0	27·0	4	5	...	2	6	8	...	1	...	40·0	...	3·7
3. Buchan (New Maud), ...	25·5	26·0	2	1	...	...	1	...	...	1	...	...	...	3·8
4. Cuninghame (Irvine), .	48·0	49·5	2	3	1	...	...	2	3	2	50·0	...	6·2	4·0
5. Dumbarton,.....	29·0	31·0	1	1	...	...	...	...	1	1	...	...	3·4	3·2
6. Dundee East,.....	44·0	56·0	8	8	1	...	4	5	3	3	12·5	...	6·8	5·4
7. Dundee West,	40·0	37·0	10	15	...	...	7	11	3	6	...	...	7·5	16·2
8. Edinburgh (City),.....	39·0	39·0	19	15	1	...	15	10	3	3	5·3	...	7·7	7·7
9. Hamilton,.....	12·5	19·0	...	5	...	...	1	3	...	2	...	...	...	10·5
10. Inveresk (Musselburgh),.	16·0	15·5	1	...	...	...	1	1	...	...	...	...	...	...
11. Kincardine (Stonehaven),	21·5	19·0	4	...	...	...	2	...	1	4	...	...	4·7	21·1
12. Linlithgow,.....	16·0	16·0	...	...	...	...	...	...	...	...	...	...	...	...
13. Old Monkland,	24·5	23·5	6	3	...	...	2	...	3	4	...	...	12·2	17·0
14. Perth,	19·5	19·5	...	3	...	...	1	3	...	1	...	...	...	5·1
15. Wigtown (Stranraer),.....	13·5	11·5	1	1	...	...	1	...	1	...	...	...	7·4	...
GENERAL RESULTS,	417·5	435·0	63	64	4	3	45	49	19	30	6·3	4·7	4·6	6·9

(e) *Training Schools for Imbecile Children.*

INSTITUTIONS.	Average Number Resident.		Admissions.		Recoveries.		Discharges not Recovered.		Deaths.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Baldovan,	48·0	27·0	15	4	...	...	2	1	7	3
Larbert,.....	162·0	84·0	40	20	...	...	14	8	12	8
TOTAL ...	210·0	111·0	55	24	...	...	16	9	19	11

APPENDIX A.—TABLE XXIII.

Return of Expenditure for each County on Account of Pauper Lunatics during the Year ending 14th May 1895.

COUNTIES.	No. of Pauper Lunatics Relieved during the Year.		Number of Days during the Year on Account of which Relief was granted to Patients.				Proportion per cent. of Days of Relief.				Expenditure for Maintenance of Patients during the Year.				Extra Expenditure for Lunatics, &c., of Dangerous Lunatics, Patients, &c.				Total Expenditure during the Year.		Amount of foregoing Expenditure contributed by Government.	
	M.	F.	In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.		Total.	In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.		In Lunatic Asylums, and Training Schools for Imbecile Children.		In Private Dwellings.	In Lunatic Asylums, and Training Schools for Imbecile Children.		In Private Dwellings.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.
			In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.	In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.		In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.	In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.	In Lunatic Asylums, and Training Schools for Imbecile Children.		In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.	In Royal, District, and Pauper Lunatic Asylums, and Training Schools for Imbecile Children.										
1 Aberdeen	401	543	167,090	77,629	298,000	560	261	179	14,233	6,113	2,228	2,228	2,228	2,228	2,228	2,228	2,228	2,228	2,228	2,228	2,228	2,228
2 Argyll	233	219	110,925	38,535	149,320	742	155	258	6,113	2,228	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456
3 Argyll and Bute	350	402	155,143	38,535	193,678	742	155	258	6,113	2,228	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456	1,456
4 Banff	106	133	32,644	22,343	54,987	675	325	325	3,152	1,365	1,002	1,002	1,002	1,002	1,002	1,002	1,002	1,002	1,002	1,002	1,002	1,002
5 Barrack	56	73	28,245	1,100	29,345	700	300	300	2,049	79	441	441	441	441	441	441	441	441	441	441	441	441
6 Berwick	38	58	22,623	1,871	24,494	696	304	304	1,267	17	933	933	933	933	933	933	933	933	933	933	933	933
7 Caithness	83	100	33,507	28,663	62,170	543	457	457	1,481	19	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481
8 Clackmannan	42	36	19,317	1,982	21,300	825	80	95	1,481	11	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481	1,481
9 Dundee	109	104	43,793	18,713	62,506	647	2	76	3,034	13	2,671	2,671	2,671	2,671	2,671	2,671	2,671	2,671	2,671	2,671	2,671	2,671
10 Dundurrie	659	763	245,898	38,624	384,522	843	81	324	19,504	11	7,520	7,520	7,520	7,520	7,520	7,520	7,520	7,520	7,520	7,520	7,520	7,520
11 Dunfermline	102	104	53,654	13,642	67,296	777	223	223	3,151	4	1,721	1,721	1,721	1,721	1,721	1,721	1,721	1,721	1,721	1,721	1,721	1,721
12 Elgin	94	126	43,793	13,642	57,435	513	187	187	9,228	5	3,213	3,213	3,213	3,213	3,213	3,213	3,213	3,213	3,213	3,213	3,213	3,213
13 Fife	272	323	157,257	68,841	226,098	628	182	190	17,592	0	3,094	3,094	3,094	3,094	3,094	3,094	3,094	3,094	3,094	3,094	3,094	3,094
14 Forfar	534	585	220,411	68,841	289,252	765	109	126	2,388	1	2,388	2,388	2,388	2,388	2,388	2,388	2,388	2,388	2,388	2,388	2,388	2,388
15 Haddington	280	259	78,154	83,907	162,061	482	518	518	4,717	10	2,947	2,947	2,947	2,947	2,947	2,947	2,947	2,947	2,947	2,947	2,947	2,947
16 Inverness	46	54	22,845	2,190	25,035	709	223	68	1,852	9	91	91	91	91	91	91	91	91	91	91	91	91
17 Kirkcaldy	13	17	7,188	1,312	8,500	790	210	210	424	18	92	92	92	92	92	92	92	92	92	92	92	92
18 Kinross	57	60	31,168	6,481	37,649	828	172	172	1,942	17	241	241	241	241	241	241	241	241	241	241	241	241
19 Kirkcubright	1587	1663	741,434	168,948	910,382	787	34	179	47,382	18	8,548	8,548	8,548	8,548	8,548	8,548	8,548	8,548	8,548	8,548	8,548	8,548
20 Lanark	74	81	33,590	4,976	38,566	878	155	109	2,360	5	1,611	1,611	1,611	1,611	1,611	1,611	1,611	1,611	1,611	1,611	1,611	1,611
21 Linlithgow	15	18	6,829	2,810	9,639	708	292	292	414	17	135	135	135	135	135	135	135	135	135	135	135	135
22 Nairn	50	77	96,925	18,101	115,026	641	335	335	2,176	12	606	606	606	606	606	606	606	606	606	606	606	606
23 Orkney	14	24	10,711	1,694	12,405	864	72	243	8,486	4	102	102	102	102	102	102	102	102	102	102	102	102
24 Peebles	280	265	117,807	41,791	159,598	685	72	243	8,486	4	102	102	102	102	102	102	102	102	102	102	102	102
25 Perth	337	367	163,000	38,536	201,536	821	179	179	11,382	0	2,096	2,096	2,096	2,096	2,096	2,096	2,096	2,096	2,096	2,096	2,096	2,096
26 Renfrew	188	204	38,463	66,876	105,340	471	529	529	3,679	14	1,382	1,382	1,382	1,382	1,382	1,382	1,382	1,382	1,382	1,382	1,382	1,382
27 Ross	71	83	13,032	6,402	19,434	856	144	144	2,844	17	308	308	308	308	308	308	308	308	308	308	308	308
28 Roxburgh	28	23	13,032	3,294	16,326	812	188	188	1,070	7	182	182	182	182	182	182	182	182	182	182	182	182
29 Selkirk	59	73	29,259	20,070	49,329	532	08	460	1,830	7	22	22	22	22	22	22	22	22	22	22	22	22
30 Shetland	183	173	82,578	16,998	99,576	817	31	152	6,007	4	167	167	167	167	167	167	167	167	167	167	167	167
31 Stirling	48	53	17,512	15,093	32,605	531	11	458	1,093	1	20	20	20	20	20	20	20	20	20	20	20	20
32 Sutherland	61	65	21,043	13,250	34,293	501	183	316	1,284	9	418	418	418	418	418	418	418	418	418	418	418	418
33 Wigton	6516	7256	2,906,493	982,199	3,888,692	692	74	234	197,993	18	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642
Totals & Averages	6516	7256	2,906,493	982,199	3,888,692	692	74	234	197,993	18	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642	15,642

APPENDIX A.—TABLE XXVI.

The Daily Rate of Maintenance for each mode of providing for Pauper Lunatics in each County during the Year ending 14th May 1895.

COUNTIES.	In Royal, District, and Parochial Asylums, and Training Schools for Imbecile Children.	In Licensed Wards of Poor- houses with Re- stricted Licences.	In Private Dwellings.	General Averages. (This also includes the Extra Expendi- ture for Cer- tificates of Lunacy, Cost of Transport, &c.)	Percentage of Patients.		
					In Royal, District, and Parochial Asylums, and Training Schools for Imbecile Children.	In Licens'd Wards of Poor- houses with Re- stricted Li- cences.	In Private Dwell- ings.
	<i>s. d.</i>	<i>s. d.</i>	<i>s. d.</i>	<i>s. d.</i>			
1. Aberdeen, . . .	1 8½	0 11½	0 10	1 4½	56·0	26·1	17·9
2. Argyll, . . .	1 1½	...	0 9	1 1	74·2	...	25·8
3. Ayr, . . .	1 2½	0 9	0 10½	1 1½	69·5	16·5	14·0
4. Banff, . . .	1 2½	...	0 9½	1 1½	67·5	...	32·5
5. Berwick, . . .	1 5½	...	0 11	1 4	70·0	...	30·0
6. Bute, . . .	1 1½	...	0 10½	1 1½	69·6	...	30·4
7. Caithness, . . .	1 6½	...	0 8	1 2½	54·3	...	45·7
8. Clackmannan, . . .	1 6½	1 2½	1 0	1 6½	82·5	8·0	9·5
9. Dumbarton, . . .	1 4½	1 0½	1 0½	1 4	64·7	27·7	7·6
10. Dumfries, . . .	1 2½	...	0 11½	1 2½	84·3	...	15·7
11. Edinburgh, . . .	1 7	1 4½	1 1½	1 5½	59·5	8·1	32·4
12. Elgin, . . .	1 2	...	0 10	1 1½	77·7	...	22·3
13. Fife, . . .	1 2	...	0 11½	1 2	81·3	...	18·7
14. Forfar, . . .	1 7½	0 11½	0 11½	1 4½	62·8	18·2	19·0
15. Haddington, . . .	1 1½	0 10½	0 9½	1 1½	76·5	10·9	12·6
16. Inverness, . . .	1 2½	...	0 8½	1 0	48·2	...	51·8
17. Kincardine, . . .	1 7½	0 10	0 10	1 5	70·9	22·3	6·8
18. Kinross, . . .	1 2½	...	0 11½	1 2½	79·0	...	21·0
19. Kirkeudbright, . . .	1 3	...	0 9	1 2½	82·8	...	17·2
20. Lanark, . . .	1 3½	1 3	1 0½	1 3½	78·7	3·4	17·9
21. Linlithgow, . . .	1 5	1 4½	0 10½	1 5	73·6	15·5	10·9
22. Nairn, . . .	1 2½	...	0 10½	1 3	70·8	...	29·2
23. Orkney, . . .	1 7½	...	0 8	1 5	64·1	...	35·9
24. Peebles, . . .	1 2½	...	1 2½	1 3½	86·4	...	13·6
25. Perth, . . .	1 5½	1 1½	1 0	1 4½	68·5	7·2	24·3
26. Renfrew, . . .	1 4½	...	1 1	1 4½	82·1	...	17·9
27. Ross, . . .	1 2½	...	0 7½	0 11½	47·1	...	52·9
28. Roxburgh, . . .	1 6	...	0 11	1 5½	85·6	...	14·4
29. Selkirk, . . .	1 6½	...	1 1½	1 6	81·2	...	18·8
30. Shetland, . . .	1 7	...	0 6½	1 2	53·2	0·8	46·0
31. Stirling, . . .	1 4½	1 0½	1 1	1 4½	81·7	3·1	15·2
32. Sutherland, . . .	1 3	...	0 8	1 0½	53·1	1·1	45·8
33. Wigtown, . . .	1 2½	1 1	0 10½	1 1½	50·1	18·3	31·6
GENERAL AVERAGES,	1 4½	1 0½	0 10½	1 3½	69·2	7·4	23·4

APPENDIX A.—TABLE XXVII.

Present Rates of Board per annum in Royal and District Asylums and the estimated Annual Cost of Patients in Parochial Asylums and Poorhouses.

ROYAL OR CHARTERED ASYLUMS.	Rates for Pauper Patients.		Minimum Rates for Private Patients.	
	From the District.	From beyond the District.	Special or District Rate.	General Rate.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Aberdeen Royal Asylum,	32 0 0	34 0 0	...	30 0 0
Crichton " " " " " "	24 0 0	32 0 0	125 0 0	32 0 0
Dundee " " " " " "	24 12 0	32 10 0	325 0 0	40 0 0
Edinburgh " " " " " "	30 11 0	30 0 0	28 0 0	28 0 0
Glasgow " " " " " "	30 0 0	...	...	440 0 0
Montrose " " " " " "	28 12 0	...	25 0 0	42 0 0
Murray's " " " " " " . . . . .	...	...	52 0 0	60 0 0

DISTRICT ASYLUMS.	Rates for Pauper Patients.		Minimum Rates for Private Patients.	
	From the District.	From beyond the District.	Special or District Rate.	General Rate.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Argyll and Bute District Asylum,	19 18 8	...	19 18 8	...
Ayr " " " " " "	22 2 0	...	...	...
Banff " " " " " "	21 5 10	...	...	...
Elgin " " " " " "	21 0 0	...	30 0 0	30 0 0
Fife " " " " " "	21 0 0	...	...	...
Govan " " " " " "	28 12 0	...	...	...
Haddington " " " " " "	20 0 0	...	30 0 0	30 0 0
Inverness " " " " " "	23 0 0	...	...	...
Kirklands Asylum, Bothwell,	22 10 8	...	...	...
Lanark District Asylum,	31 4 0	...	...	...
Mid-Lothian District Asylum,	22 0 0	32 0 0	30 0 0	36 8 0
Perth " " " " " "	26 0 0	...	...	...
Roxburgh " " " " " "	25 0 0	...	27 0 0	40 0 0
Stirling " " " " " "	25 0 0	32 10 0	35 0 0	35 0 0

PAROCHIAL ASYLUMS (i.e., Lunatic Wards of Poorhouses with unrestricted Licences.)	Estimated Annual Cost of Patients belonging to Parish or Combination.	Rates charged for Boarders from other Parishes.	PAROCHIAL ASYLUMS. — (Continued.)	Estimated Annual Cost of Patients belonging to Parish or Combination.	Rates charged for Boarders from other Parishes.
	£ s. d.	£ s. d.		£ s. d.	£ s. d.
Barony Parochial Asylum,	27 6 0	7 31 4 0	Greenock Parochial Asylum,	22 15 6	32 10 0
Glasgow " " " " " "	18 4 0	32 10 0	Paisley (Craw Road),	19 16 6	35 2 0
Govan " " " " " "	26 0 0	...	Paisley (Riccartonbar),	23 12 4	32 10 0

LUNATIC WARDS OF POORHOUSES WITH RESTRICTED LICENCES.	Estimated Annual Cost of Patients belonging to Parish or Combination.	Rates charged for Boarders from other Parishes.	LUNATIC WARDS OF POORHOUSES. — (Continued.)	Estimated Annual Cost of Patients belonging to Parish or Combination.	Rates charged for Boarders from other Parishes.
	£ s. d.	£ s. d.		£ s. d.	£ s. d.
Aberdeen (East),	17 11 0	22 2 0	Hamilton,	17 11 0	...
Aberdeen (West),	21 9 0	20 0 0	Inveresk,	18 7 3	...
Buchan,	15 12 0	...	Kincardine,	17 6 8	20 0 0
Cunninghame,	16 13 8	...	Linthgow,	20 10 7	21 4 8
Dumbarton,	21 3 4	23 8 0	Old Monkland,	21 5 9	24 14 0
Dundee, East,	20 17 1	...	Perth,	20 12 9	...
Dundee, West,	19 17 7	...	Wigtown,	18 8 4	...
Edinburgh,	26 12 7	...			

¹ Reduced to £10 in all suitable cases through the operation of the Endowment.

² £30, 11s. for paupers from Dundee Combination, and £28, 12s. for paupers from the other parishes in Forfarshire.

³ In consideration of Gifts and Donations.

⁴ The rate is much less in special cases.

⁵ The Directors frequently exercise the powers under their charter of receiving patients especially from Perth and neighbourhood, below the minimum.

⁶ The rent is taken as the proportion allocated to the lunatic wards of the gross rental in the valuation roll for the year, divided by the number of inmates for which the wards are licensed.

⁷ £31, 4s. for City and Govan Parishes, and £32, 10s. for other Lanarkshire Parishes.

⁸ £32, 10s. for Renfrewshire Parishes and Glasgow City Parish, and £35, 2s. for other Parishes.

Expenditure of District Lunacy Boards during the Financial Year 1894-95, in Providing, Building, Repairing, and Fitting up and Furnishing District Asylums; and amount of Monies Borrowed, and Assessed for, by District Lunacy Boards, under the provisions of the Act 20 & 21 Vict. c. 71.

Commissioners in Lunacy for Scotland.

43

Providing Expenditure from 15th May 1894 to 15th May 1895.										Amount of Monies Borrowed remaining due at 15th May 1895.		Assessments for Lunacy Purposes on the Landward parts of Counties and Burghs in each District in the year to 15th May 1895.
1. Land.		2.	3.	4.	5.	6. Loans.		7.	8.	9.		
Purchase of Land other than Feued Lands.	(1) Rent or feu-duty of Asylum Grounds.	Buildings, Improvements, Alterations, and Additions.	Expenditure on Farm (Erection of Buildings and Improvements).	(2) Furniture and Furnishings.	Miscellaneous Expenses.	Instalments.	Interests.	Total.	Total Providing Expenses.	(3) Deprectable to the Providing Account of Profits on keeping Private Patients, Rent of Lands, &c.	Net Providing Expenses.	
£	£	£	£	£	£	£	£	£	£	£	£	
1. {Argyll (4),	164	1,627	.	7	236	1,016	806	1,822	3,856	178	3,678	
2. Bute (4),	.	5,540	.	1,250	33	451	177	628	661	96	565	
3. Banff,	25	311	.	473	87	90	366	366	7,395	100	7,295	
4. Elgin,	31	2,034	.	59	49	67	67	157	542	1,440	542	
5. Fife,	5	3,691	.	73	189	246	400	646	3,243	32	3,211	
6. Glasgow, City (6)	5	33,105	.	820	3,378 (5)	3,378 (5)	3,378 (5)	4,364 (4)	8,327	167	8,160	
7. Govan (6),	3	24,929	1,292	577	1,087	890	3,087	3,907	38,104	389	37,715	
8. Haddington,	2	200	.	35	1,068	1,800	3,170	4,970	32,859	1,098	31,741	
9. Inverness,	2	861	423	127	65	269	214	483	740	112	628	
10. Lanark (6),	2	34,052	.	6,005	300	409	398	807	2,879	124	2,755	
11. Midlothian,	163	529	.	33	3,412 (7)	15,650 (8)	3,437 (8)	19,087 (9)	62,556	313	62,243	
12. Perth,	7	4,582	.	32	160	2,103	917	3,020	3,905	361	3,544	
13. Roxburgh,	590	147	.	185	157	362	398	760	5,538	.	5,538	
14. Stirling,	113	3,459	2	165	272	2,264	913	3,177	4,099	132	3,967	
Totals,	667	115,510	1,717	8,927	7,321	1,278	1,553	2,831	6,842	416	6,426	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026	115,510	8,927	7,321	30,136	16,889	47,025	181,526	3,513	178,008	
Totals,	667	1,026										

(1) Rent or feu-duty of farm lands proper form a part of Maintenance Expenditure, and appear in Table XXXII, showing the receipts and expenses of Asylum farms.

(2) Under this heading appears such expenditure as is needed for the complete equipment of the Asylum and additions to it, and articles rendered necessary by increase of population. The current Expenditure under this heading is given in the Table following.

(3) The profit from private patients is divided equally between the providing and maintenance accounts.

(4) The Counties of Argyll and Bute, although served by one District Asylum, have separate District Lunacy Boards. The expenditure by each Board on Miscellaneous Expenses and Loans is, however, shown separately, as is also the Amount of Monies borrowed remaining due and the Amount Assessed for.

(5) Under these heads are included transactions in connection with Temporary Loans contracted by the Five District Lunacy Board. Of these Loans, which were repayable on demand, and for which no assignments were given, there was paid off during the year a principal sum of £2,100, while £9 was paid for interest.

(6) The City of Glasgow, Govan, and Lanark District Lunacy Boards, which were constituted in 1888, had apportioned among them the Amount of Monies borrowed remaining due by the Glasgow District Lunacy Board at the time of its dissolution in 1889, as follows:—City of Glasgow, £14,348; Govan, £12,470; Lanark, £29,800.

(7) Includes a sum of £2,178 charged to the Providing Account, under the provisions of 20 & 21 Vict. c. 71, s. 5.

(8) Under these heads are included transactions in connection with Temporary Loans contracted by the Lanark District Lunacy Board amounting to £41,656. Of these loans, which were repayable on demand and for which no assignments were given, there was paid off during the year a principal sum of £15,656, while £551 was paid for interest, and there remained due at 15th May 1895 a principal sum of £26,006.



APPENDIX A.—

The Expenditure of District Boards of Lunacy on the Maintenance and

MAINTENANCE EXPENDITURE FROM

ASTLUMS.	Average Number of Patients Resident during the Financial Year.	1.		2.		3.		4.		5.		6.		7.		8.		9.		10.		11.		12.		13.	
		Butcher Meat, Fresh, Cured, and Tinned; Condensed Preparations of Meat, Poultry, and Game.		Fish, Fresh and Cured.		Milk.		Butter, Suet, Lard, Eggs, and Cheese.		Bread, Flour, Meal, Barley, Pease, Rice, &c.		Potatoes, Green Vegetables, Turnips, &c.		Sugar.		Treacle.		Tea and Coffee.		Wines, Spirits, and Malt Liquors.		Fresh and dry Fruits and Minor Articles of Food.		Tobacco.		Household Requisites.	
		Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Male Patient.	Total.	Per Patient.
		£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.
1. Argyll, . . .	398	1067	2 13 7	163	0 8 2	632	1 11 9	512	1 5 9	707	1 15 6	330	0 16 7	108	0 5 5	2	0 0 1	206	0 10 4	15	0 0 9	31	0 1 7	95	0 9 2	62	0 3 1
2. Ayr, . . .	422	905	2 2 11	119	0 5 8	501	1 3 9	825	1 19 1	905	2 2 11	530	1 5 1	78	0 3 8	17	0 0 10	185	0 8 9	74	0 3 6	78	0 3 8	120	0 12 7	40	0 1 11
3. Banff, . . .	141	370	2 12 6	20	0 2 10	237	1 13 7	112	0 15 11	374	2 13 1	90	0 12 9	41	0 5 10	5	0 0 9	65	0 9 3	43	0 6 1	20	0 2 10	38	0 10 8	13	0 1 10
4. Elgin, . . .	153	400	2 12 3	43	0 5 2	217	1 8 4	185	1 4 2	339	2 4 4	144	0 13 10	38	0 5 0	6	0 0 9	66	0 8 8	40	0 5 3	53	0 6 11	48	0 14 9	52	0 6 10
5. Fife, . . .	443	1148	2 11 7	124	0 5 7	682	1 8 6	672	1 10 4	888	2 0 1	332	0 15 0	108	0 4 11	1	0 0 1	200	0 9 0	73	0 3 4	148	0 6 8	99	0 9 8	322	0 14 6
6. Haddington, . .	130	305	2 6 11	17	0 2 7	159	1 4 6	127	0 19 6	321	2 9 5	90	0 13 10	37	0 5 8	2	0 0 4	50	0 7 8	45	0 6 11	39	0 6 0	27	0 9 0	70	0 10 9
7. Inverness, . .	433	1278	2 19 0	61	0 2 4	615	1 8 5	475	1 1 11	872	2 0 3	291	0 13 5	84	0 3 11	1	0 0 1	188	0 7 6	50	0 2 4	46	0 2 1	73	0 6 7	192	0 8 10
8. Kirklands, . .	229	495	2 3 3	83	0 7 3	411	1 15 11	280	1 4 5	439	1 13 4	148	0 12 11	85	0 7 5	.	.	112	0 9 9	46	0 4 0	52	0 4 6	49	0 7 3	51	0 4 5
9. Midlothian, . .	223	535	2 8 0	77	0 6 11	391	1 15 1	321	1 8 9	507	2 5 6	172	0 15 5	78	0 7 10	.	.	95	0 8 6	90	0 8 1	72	0 6 5	47	0 8 10	75	0 6 9
10. Perth, . . .	313	983	3 1 10	79	0 5 0	731	2 5 4	395	1 4 10	784	2 9 4	375	1 3 7	67	0 4 3	2	0 0 2	107	0 6 9	142	0 8 11	55	0 3 6	78	0 9 5	113	0 7 1
11. Roxburgh, . .	242	580	2 7 11	120	0 9 11	591	2 8 10	295	1 4 5	611	2 10 6	153	0 12 8	46	0 3 10	1	0 0 1	83	0 6 10	53	0 4 5	59	0 4 11	54	0 9 3	60	0 5 0
12. Stirling, . . .	559	1331	2 7 7	284	0 9 1	1017	1 16 5	691	1 4 9	970	1 14 8	479	0 17 2	173	0 6 2	12	0 0 5	233	0 10 6	165	0 5 11	203	0 7 3	139	0 9 10	319	0 13 5
Totals and Averages,	3691	9392	2 10 11	1150	0 6 3	6124	1 13 2	4890	1 6 6	7717	2 1 10	3134	0 17 0	943	0 5 1	49	0 0 3	1625	0 8 10	836	0 4 6	856	0 4 8	866	0 9 6	1369	0 7 5

¹ GENERAL NOTES.—(a) The expenses detailed in this Table relate solely to those payable out of the Poor Rate. The expenses in

(b) Fractions of 1d. which are under ½d. have been omitted in the calculations, and all fractions above ½d.

² The cost of furniture and furnishings included in this Table refers only to the replacement or repair of what has been worn out

³ These amounts include gratuities for long service.

TABLE XXIX.

Management of Pauper Lunatics during the Financial Year 1894-95.¹

45

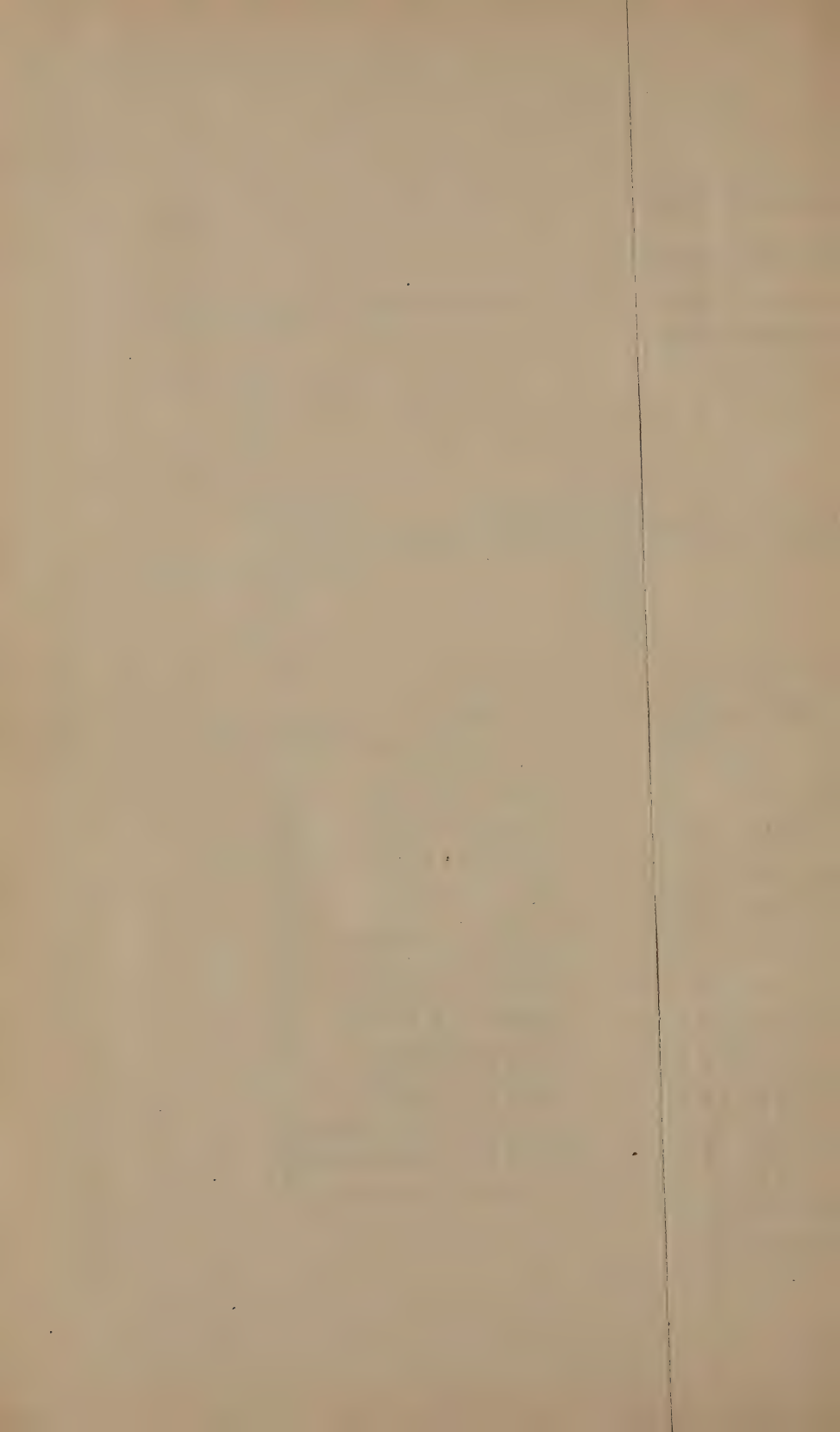
15TH MAY 1894 TO 15TH MAY 1895.

14.		15.		16.		17.		18.						19.		20.		21.		22.		23.			
Laundry Requisites.		Clothing, Boots, and Shoes.		Medicines and Surgical Appliances.		Fuel, Gas, and Water.		Salaries and Wages.						Fees, Taxes, Amusements, Funeral Expenses, Carriage of Articles, Conveyance, and Incidental Expenses.		Furniture and Furnishings. ²		TOTAL MAINTENANCE EXPENSES.		DEDUCT OR ADD, AS THE CASE MAY BE:—Profit or Loss on Farm and Garden, Profit from keeping Private Patients, Receipts for Work done by Patients or Attendants other than for Asylums, &c.		NET MAINTENANCE EXPENSES.		ASYLUMS.	
								of Officers.		of Attendants and Servants.		of Artisans.		Total of Salaries and Wages.											
Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.	Total.	Per Patient.		
£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.	£	£ s. d.		
64	0 3 3	549	1 7 7	71	0 3 7	803	2 0 4	1010	2 10 9	1199	3 0 3	325	0 16 4	2534	6 7 4	399	1 0 1	449	1 2 7	8799	22 2 2	— 272	8527	21 8 6	1. Argyll.
103	0 4 11	777	1 16 10	114	0 5 5	1117	2 12 11	1147	2 14 4	1101	2 12 2	238	0 11 3	2486	5 17 9	410	0 19 5	632	1 9 11	10016	23 14 8	— 176	9840	23 6 4	2. Ayr.
44	0 6 3	281	1 19 10	45	0 6 5	303	2 3 0	378	2 13 7	317	2 5 0	.	.	695	4 18 7	121	0 17 2	212	1 10 1	3129	22 3 10	— 466	2663	18 17 9	3. Banff.
26	0 4 8	209	1 7 4	15	0 2 0	372	2 8 8	322	2 2 1	410	2 13 7	22	0 2 11	754	4 18 7	147	0 19 3	178	1 3 3	3342	21 16 10	— 345	2997	19 11 9	4. Elgin.
157	0 7 1	479	1 1 8	87	0 3 11	980	2 4 3	1014	2 5 9	1116	2 10 5	217	0 9 10	2347	5 6 0	699	1 11 7	554	1 5 0	10045	22 13 6	— 354	9691	21 17 6	5. Fife.
31	0 4 9	162	1 4 11	20	0 3 1	210	1 12 4	600 ³	4 12 4	344 ³	2 12 11	.	.	944	7 5 8	124	0 19 1	173	1 6 7	2953	22 14 4	— 221	2732	21 0 4	6. Haddington.
104	0 4 10	884	2 0 10	58	0 2 8	1195	2 15 2	1063	2 9 1	1232	2 16 11	144	0 6 3	2439	5 12 8	407	0 18 10	777	1 15 11	10055	23 4 5	+ 9	10064	23 4 10	7. Inverness.
24	0 4 9	401	1 15 0	66	0 5 9	381	1 13 3	798	3 9 8	864	3 15 5	220	0 19 3	1882	8 4 4	305	1 6 8	202	0 17 8	5541	24 3 11	— 239	5302	23 3 1	8. Kirkcaldy.
60	0 4 6	418	1 17 6	82	0 4 8	355	1 12	997	4 9 5	640	2 17 5	101	0 9 1	1738	7 15 11	490	2 3 11	254	1 2 9	5827	26 2 7	— 282	5545	24 17 4	9. Midlothian.
118	0 7 5	808	2 10 10	70	0 4 5	527	1 13 2	970	3 1 0	898	2 16 6	170	0 10 4	2038	6 8 2	400	1 5 2	463	1 9 1	8325	26 3 7	— 267	8058	25 6 10	10. Perth.
58	0 4 10	476	1 19 4	50	0 4 2	668	2 15 0	1108	4 11 7	653	2 13 11	149	0 12 4	1910	7 17 10	323	1 6 8	288	1 3 10	6477	26 15 8	— 260	6217	25 13 10	11. Roxburgh.
126	0 4 10	1024	1 16 8	159	0 5 8	1542	2 15 2	1297	2 6 5	1876	3 7 1	391	0 14 0	3564	6 7 6	977	1 14 11	790	1 8 3	14238	25 9 5	— 622	13616	24 7 2	12. Stirling.
855	0 5 2	6468	1 15 1	807	0 4 4	8461	2 5 10	10704	2 18 0	10650	2 17 8	1977	0 10 9	23331	6 6 5	4802	1 6 0	4972	1 6 11	88747	24 0 11	— 3495	85252	23 1 11	Totals and Averages.

connection with lands, buildings, furnishings, &c., payable out of the County Assessments, are given in the Table preceding.

have been reckoned as 1d.

or destroyed. The cost of furniture and furnishings required for original buildings or additions is given in the Table preceding.





APPENDIX A.—

The Quantity per Inmate of the various Articles of Dietary, and of Tobacco and Fuel, supplied

ASYLUMS.	Average Number of Inmates.			1.		2.		3.		4.		5.		6.		7.		8.		9.		10.		11.		12.		13.		14.	
				Fresh Butcher Meat.		Cured Butcher Meat.		Tinned Butcher Meat.		Poultry and Game.		Fresh Fish.		Cured Fish.		Unskimmed Milk.		Skimmed Milk.		Butter.		Suet, Lard, &c.		Eggs.		Cheese.		Bread.		Flour.	
	Patients.	Officers and Servants Boarded.	Total.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per gal.	Quantity per Inmate.	Price per gal.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.
1. Argyll, .	398	57	455	105	£ s. d. 2 6 8	2	£ s. d. 2 15 9	4	£ s. d. 3 12 3 (2).	.	23	£ s. d. 0 13 0	30	£ s. d. 0 16 9	42	£ s. d. 0 0 8	.	.	16	£ s. d. 5 8 3	5	£ s. d. 1 17 4	2	£ s. d. 5 2 9	10	£ s. d. 1 19 6	.	.	221	£ s. d. 0 9 9	
2. Ayr, .	422	53	475	75	£ s. d. 2 5 11 (2).	.	19	£ s. d. 1 13 0 (2).	.	21	£ s. d. 1 1 11	4	£ s. d. 1 5 7	36	£ s. d. 0 0 7	.	.	21	£ s. d. 5 19 1	3	£ s. d. 1 15 11	3	£ s. d. 5 2 6	14	£ s. d. 3 3 0	83	£ s. d. 0 12 11	179	£ s. d. 0 8 0		
3. Banff, .	141	16	157	87	£ s. d. 2 18 4	1	£ s. d. 2 16 0	.	4	£ s. d. 2 1 8	8	£ s. d. 0 12 10	9	£ s. d. 1 1 6	36	£ s. d. 0 0 10	.	.	10	£ s. d. 5 0 9	4	£ s. d. 2 18 7	3	£ s. d. 2 16 0	8	£ s. d. 1 0 7	464	£ s. d. 0 7 8	11	£ s. d. 0 9 9	
4. Elgin, .	153	21	174	83	£ s. d. 2 17 6	2	£ s. d. 4 11 2	3	£ s. d. 3 18 1 (2).	.	37	£ s. d. 0 13 8	2	£ s. d. 1 8 1	23	£ s. d. 0 1 0	5	£ s. d. 0 0 6	12	£ s. d. 5 18 10	4	£ s. d. 1 17 4	2	£ s. d. 4 13 4	14	£ s. d. 2 5 1	358	£ s. d. 0 8 0	20	£ s. d. 0 17 0	
5. Fife, .	443	65	508	103	£ s. d. 2 1 1 (2).	.	18	£ s. d. 1 19 10 (2).	.	18	£ s. d. 0 17 6	16	£ s. d. 0 14 6	32	£ s. d. 0 0 9	.	.	17	£ s. d. 5 3 4	4	£ s. d. 1 4 3	4	£ s. d. 4 5 11	17	£ s. d. 2 3 2	303	£ s. d. 0 7 3	21	£ s. d. 0 9 3		
6. Haddington, .	130	15	145	62	£ s. d. 3 4 5	1	£ s. d. 4 15 1	7	£ s. d. 2 15 3	2	£ s. d. 3 6 10	14	£ s. d. 0 15 7	1	£ s. d. 1 19 11	26	£ s. d. 0 0 10	.	.	9	£ s. d. 6 12 8	4	£ s. d. 3 0 8	6	£ s. d. 3 12 3	3	£ s. d. 2 17 7	338	£ s. d. 0 7 11	16	£ s. d. 0 11 8
7. Inverness, .	433	56	489	112	£ s. d. 2 8 6	1	£ s. d. 4 14 9	5	£ s. d. 2 6 8	1	£ s. d. 3 5 4	3	£ s. d. 1 1 0	11	£ s. d. 0 15 8	85	£ s. d. 0 0 9	.	.	15	£ s. d. 4 10 2 (2).	.	4	£ s. d. 3 16 11	12	£ s. d. 1 15 7 (2).	.	.	262	£ s. d. 0 7 9	
8. Kirklands, .	229	34	263	81	£ s. d. 2 8 0	1	£ s. d. 4 6 6	5	£ s. d. 1 19 0 (2).	.	25	£ s. d. 0 19 10	16	£ s. d. 0 14 1	42	£ s. d. 0 0 9	.	.	18	£ s. d. 4 6 1	6	£ s. d. 1 10 8	2	£ s. d. 4 7 5	8	£ s. d. 3 2 2	263	£ s. d. 0 8 3	30	£ s. d. 0 7 10	
9. Midlothian, .	223	30	253	88	£ s. d. 2 6 7 (2).	.	13	£ s. d. 2 5 5 (2).	.	32	£ s. d. 1 0 4	1	£ s. d. 1 10 8	34	£ s. d. 0 0 11	.	.	15	£ s. d. 5 14 7	2	£ s. d. 2 5 4	5	£ s. d. 3 12 6	10	£ s. d. 2 19 3	399	£ s. d. 0 7 10	8	£ s. d. 0 9 0		
10. Perth, .	318	45	363	107	£ s. d. 2 5 0	1	£ s. d. 4 18 6	31	£ s. d. 1 16 4 (2).	.	32	£ s. d. 0 14 6	1	£ s. d. 1 2 6	46	£ s. d. 0 0 10	.	.	10	£ s. d. 5 5 1	4	£ s. d. 1 18 5	9	£ s. d. 3 3 1	15	£ s. d. 2 6 8	254	£ s. d. 0 8 4	22	£ s. d. 0 9 4	
11. Roxburgh, .	242	28	270	91	£ s. d. 2 5 7	.	15	£ s. d. 2 1 8 (2).	.	45	£ s. d. 1 2 2	.	.	55	£ s. d. 0 0 9	.	.	14	£ s. d. 4 19 8	3	£ s. d. 1 16 2	5	£ s. d. 3 11 9	11	£ s. d. 2 13 2	332	£ s. d. 0 8 11	15	£ s. d. 0 8 5		
12. Stirling, .	559	81	640	72	£ s. d. 2 16 2 (2).	.	12	£ s. d. 2 4 2	1	£ s. d. 2 17 5	39	£ s. d. 1 0 8	2	£ s. d. 1 14 11	40	£ s. d. 0 0 9	.	.	14	£ s. d. 5 5 3	4	£ s. d. 1 11 3	6	£ s. d. 3 17 5	6	£ s. d. 2 9 11	.	.	323	£ s. d. 0 6 5	
Totals & Averages,	3691	501	4192	89	£ s. d. 2 10 4	1	£ s. d. 4 2 6	12	£ s. d. 2 8 9	2	£ s. d. 2 17 10	25	£ s. d. 0 17 9	8	£ s. d. 1 4 0	37	£ s. d. 0 0 9	5	£ s. d. 0 0 6	14	£ s. d. 5 7 9	4	£ s. d. 1 19 8	4	£ s. d. 4 0 2	11	£ s. d. 2 8 0	(1)341 83	£ s. d. 0 8 7	(1)244 18	£ s. d. 0 9 7

(1) These figures are the averages of the quantities of bread and

(2) In the cases marked thus, the article also formed part of the

TABLE XXX.

to each District Asylum, during the Financial Year 1894-95, and the Price of each article supplied.

15.		16.		17.		18.		19.		20.		21.		22.		23.		24.		25.		26.		27.		28.		29.		ASYLUMS.
Meal.		Barley.		Pease, &c.		Rice, &c.		Potatoes.		Green Vegetables, Turnips, &c.		Fresh Fruits.		Dry Fruits.		Sugar.		Treacle.		Tea.		Wines and Spirits.		Malt Liquors.		Tobacco.		Fuel.		
Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per cwt.	Quantity per Inmate.	Price per gal.	Quantity per Inmate.	Price per gal.	Quantity per Male Inmate.	Price per cwt.	Quantity per Inmate.	Price per ton.	
lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	lbs.	£ s. d.	gills.	£ s. d.	pints.	£ s. d.	ozs.	£ s. d.	cwts.	£ s. d.	
86	0 10 6	16	0 8 6	7	0 9 10	22	0 10 2	305	0 3 4	109	0 5 7	1	2 6 10	2	1 2 3	32	0 16 5	1	0 5 10	6	8 7 10	1	0 16 3	.	.	41	20 2 11	47	0 12 5	1. Argyll.
99	0 10 6	12	0 7 8	31	0 8 11	19	0 12 1	323	0 8 7	164	0 8 8	2	1 12 3	3	1 4 11	24	0 15 0	3	1 4 7	5	7 16 0	7	0 13 5	1	0 1 1	56	20 0 6	50	0 10 3	2. Ay.
122	0 10 11	12	0 8 0	20	0 7 10	8	0 13 0	269	0 2 2	97	0 7 2	7	0 13 11	2	1 8 3	38	0 17 6	7	0 10 0	5	9 6 8	3	0 19 5	38	0 0 9	47	20 6 0	26	0 17 8	3. Banff.
84	0 9 6	23	0 6 1	20	0 7 1	11	0 7 11	162	0 4 6	130	0 8 8	4	0 8 2	3	1 14 9	45	0 11 0	10	0 8 2	7	5 12 0	3	0 17 5	33	0 0 8	72	18 11 3	36	0 16 3	4. Elgin.
95	0 10 7	20	0 8 0	18	0 9 4	19	0 10 5	278	0 2 11	147	0 4 5	2	1 15 4	4	1 4 5	30	0 16 2	1	0 9 4	4	9 18 7	5	0 13 11	4	0 1 4	54	15 19 1	53	0 9 4	5. Fife.
126	0 13 1	27	0 9 3	17	0 10 0	2	0 17 3	188	0 3 11	122	0 5 4	11	1 7 2	1	1 13 3	29	0 19 7	5	0 6 5	9	10 14 0	4	0 15 1	45	0 0 9	39	20 10 8	28	0 14 0	6. Haddington.
122	0 11 4	11	0 8 0	32	0 9 2	27	0 9 9	222	0 3 1	74	0 8 10	1	1 1 0	1	1 10 7	21	0 18 1 (2)	.	.	4	7 12 10	2	0 18 5	6	0 1 3	31	19 3 0	52	0 16 3	7. Inverness.
59	0 12 2	11	0 7 11	6	0 11 1	23	0 12 11	225	0 3 10	107	0 3 8	7	0 15 2	4	1 1 11	48	0 15 2	.	.	6	7 8 7	3	0 18 0	8	0 2 0	32	20 7 4	49	0 9 2	8. Kirklands.
71	0 12 7	7	0 8 4	26	0 8 4	14	0 9 7	266	0 3 0	148	0 4 11	12	1 2 0	3	2 6 9	44	0 15 6	.	.	4	7 9 4	15	0 12 5	13	0 0 11	37	21 5 4	64	0 6 8	9. Midlothian.
167	0 11 6	15	0 9 4	20	0 9 8	14	0 13 5	254	0 4 0	199	0 9 4	6	1 2 1	3	1 6 1	25	0 16 10	2	0 8 0	4	9 2 0	10	0 11 4	39	0 0 11	43	19 14 2	38	0 10 8	10. Perth.
124	0 11 7	11	0 8 4	27	0 9 8	17	0 11 0	201	0 3 6	124	0 4 6	7	1 4 11	2	1 6 9	22	0 16 11	1	0 7 0	4	7 18 8	2	1 0 2	13	0 1 10	39	21 0 0	56	0 12 11	11. Roxburgh.
76	0 10 10	11	0 7 11	20	0 10 8	9	1 2 7	362	0 2 9	198	0 3 5	8	1 7 4	5	1 13 6	33	0 18 1	1	1 7 11	4	8 4 7	6	0 18 9	7	0 1 11	44	19 16 8	70	0 8 0	12. Stirling.
103	0 11 3	15	0 8 1	21	0 9 4	15	0 12 6	255	0 3 5	129	0 6 3	5	1 4 8	3	1 9 5	32	0 16 4	3	0 11 11	5	8 5 11	5	0 16 3	19	0 1 3	45	19 14 9	47	0 12 0	Totals & Averages.

flour used respectively in asylums which do, and which do not, bake their own bread.
asylum dietary, but the quantity was below 1 lb. per inmate during the year.

Quantities and Estimated Values of Articles supplied to District Asylums from Asylum Farms and Gardens during the Financial Year 1894-95; and the Prices at which the Produce supplied has been Estimated.

FARMS AND GARDENS* OF DISTRICT ASYLUMS.		QUANTITIES AND ESTIMATED VALUES OF SUPPLIES TO ASYLUMS FROM ASYLUM FARMS AND GARDENS.												PRICES AT WHICH PRODUCE SUPPLIED TO ASYLUMS HAS BEEN ESTIMATED.												FARMS AND GARDENS* OF DISTRICT ASYLUMS.																		
		Butcher Meat.		Poultry.		Milk.		Butter.		Eggs.		Potatoes.		Green Veggies.		Fresh Fruits.		Sundries.		Total Value.																								
														cwt.	£	lbs.	£					cwt.	£	lbs.	£																			
1. Argyll,	171	372	67	2	18964	632	.	66	2	252	49	397	114	347	5	93	1269	.	3	7	11	0	3	11	0	5	9	1	12	3	1. Argyll.													
2. Ayr,	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	297	.	.	.	.	.	.	.	.	.	.	.	.	.	2. Ayr.												
3. Banff,	69	208	646	12	5682	237	.	526	13	377	41	135	48	940	6	102	667	3	0	3	2	1	7	0	0	10	.	.	.	.	3. Banff.												
4. Elgin,	.	.	40	1	4898	217	704	35	302	13	236	52	202	88	662	2	408	.	2	16	0	0	0	11	5	11	4	4	16	5	0	4	5	0	8	9	0	6	9	4. Elgin.				
5. Fife,	26	56	.	.	8885	341	1263	184	610	135	308	6	128	850	2	3	1	.	0	0	9	0	2	11	0	4	5	2	3	8	5. Fife.				
6. Haddington,	25	70	478	14	3312	159	.	815	26	245	43	157	42	1461	18	17	394	2	16	0	3	5	7	0	0	10	3	11	6	0	3	11	0	5	4	1	7	7	6. Haddington.
7. Inverness,	70	170	314	9	1275	45	.	413	13	296	52	323	142	.	.	22	453	2	8	7	3	4	2	0	0	8	8	10	6	0	3	6	0	8	10	.	.	7. Inverness.	
8. *Kirklands,	.	.	82	3	.	.	.	295	10	45	7	243	44	352	5	.	69	4	1	11	3	15	11	0	3	1	0	3	7	1	11	10	8. *Kirklands.	
9. Midlothian,	11	31	53	1	8522	391	.	1079	39	602	90	334	82	2774	27	.	661	2	16	4	1	18	7	0	0	11	4	1	0	3	0	0	4	11	1	1	10	9. Midlothian.	
10. *Perth,	3	5	662	153	451	211	1190	10	4	383	1	13	4	0	4	7	0	9	4	0	18	10	10. *Perth.			
11. *Roxburgh,	44	102	145	27	299	67	1247	16	16	228	2	6	4	0	3	9	0	4	6	1	8	9	11. *Roxburgh.			
12. Stirling,	45	109	180	6	.	.	.	287	9	2056	283	1067	183	273	3	93	686	2	8	5	3	14	8	3	10	3	0	2	9	0	3	5	1	4	7	12. Stirling.	
Totals and Averages, }		464	1123	1865	48	52038	2022	704	35	3783	125	6309	1003	4843	1433	9636	101	475	6365	2	8	5	2	17	8	0	0	9	5	11	4	3	14	0	0	3	2	0	5	11	1	3	6	Totals and Averages, }

* Those marked with an asterisk are gardens only.

APPENDIX A.—TABLE XXXII.

Acreage of Farms attached to District Asylums; Receipts and Expenses of such Farms and Gardens during the Financial Year 1894-95; and Profit shown on the Year's Transactions.

FARMS AND GARDENS* OF DISTRICT ASYLUMS.	Acreage of Farm and Garden.			Receipts.														Expenses.											Profit + or Loss—	
	Arable or in Per- manent Pasture.	Non-Arable.	Total.	1. Valuation of Stock at 15th May 1895.	2. Butcher Meat.	3. Poultry.	4. Milk.	5. Butter and Cheese.	6. Eggs.	7. Potatoes.	8. Green Vegetables.	9. Fresh Fruits.	10. Grain.	11. Live Stock.	12. Wool, Hides, Skins.	13. Grazings, Cartage, and Sundries.	14. Total.	1. Valuation of Stock at 15th May 1894.	2. Rents.	3. Interest on Unre- paid Outlay from Providing Account of Stock and Implements.	4. Live Stock.	5. Implements and Harness.	6. Seeds and Plants.	7. Podder, Roots, and Feeding Stuffs.	8. Manures.	9. Paid Labour.	10. Miscellaneous.	11. Total.		
1. Argyll,		20	19	39	746	372	2	670	.	2	49	114	5	8	153	9	211	2336	558	40	37	488	32	20	774	.	143	97	2189	+147
2. Ayr,		70	2	72	30	.	.	.	.	17	277	3	285	.	.	91	703	80	100	.	164	43	51	.	26	58	5	527	+176	
3. Banff,		213	10	223	1541	208	12	237	.	13	52	48	6	135	439	9	38	2798	1359	191	.	325	91	63	96	42	120	45	2332	+466
4. Elgin,		77	.	77	690	.	1	217	35	13	52	94	2	59	133	.	8	1304	688	157	.	47	6	30	49	31	43	66	1117	+187
5. Fife,		72	72	144	604	56	.	341	.	.	184	135	6	26	223	.	170	1745	555	167	.	192	1	37	63	13	207	188	1453	+292
6. Haddington,		116	6	122	916	70	14	159	.	26	99	42	18	213	255	.	153(1)	1965	822	443	.	115	68	57	19	51	187	48	1810	+155
7. Inverness,		106	60	166	667	170	12	45	.	13	52	142	.	.	30	.	48	1179	544	93	24	178	120	36	68	43	53	36	1195	- 16
8. *Kirkcaldy,		6	6	12	.	.	3	.	.	10	7	45	5	99	.	.	169	.	.	.	14	.	18	27	4	52	.	115	+ 54	
9. Midlothian,		85	3	88	844	31	6	406	.	41	90	104	27	153	.	44	1746	773	90	.	128	68	116	277	78	226	64	1320	- 74	
10. *Perth,		32	41	73	.	5	.	.	.	153	211	10	176	.	.	4	559	.	26	.	.	19	45	127	.	83	3	303	+256	
11. *Roxburgh,		23	12	35	151	102	.	.	.	27	67	16	16	92	7	21	499	153	.	.	105	5	22	1	34	60	6	386	+113	
12. Stirling,		71	.	71	1269	112	6	.	.	9	283	183	3	31	580	.	399	2875	1349	159	.	202	35	84	136	59	280	99	2403	+472

* Those marked with an asterisk are gardens only.

(1) Includes a sum of £46 for sale of stones from Quarry, and House Rent.

APPENDIX B.

ENTRIES MADE BY THE COMMISSIONERS IN
THE PATIENTS' BOOK OF ASYLUMS AND POORHOUSES.

ROYAL AND DISTRICT ASYLUMS.

ABERDEEN ROYAL ASYLUM,
17th and 19th January 1895.

Appendix B.

Commissioners'
Entries.Royal and
District
Asylums.Aberdeen
Royal Asylum.

There are 712 patients under certificates and 1 voluntary inmate on the registers of the asylum at present. The position of the certificated patients is shown in the following statement :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Resident,	112	118	192	273	695
Absent on Probation,	7	7	1	2	17
	119	125	193	275	712

Four male and 1 female private patients, and 44 male and 39 female pauper patients, are in the Daviot branch establishment. The rest are in the establishment at Aberdeen.

Since 16th July, the date of last visit, the following changes have taken place :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Admitted,	20	14	26	34	94
Discharged recovered,	10	10	10	24	54
Discharged unrecovered,	3	5	11	7	26
Dead, . . . . .	...	3	7	6	16

The deaths are registered as due in 5 cases to diseases of the brain, in 5 cases to diseases of the heart, in 2 cases to diseases of the lungs, in 2 cases to diseases of the kidneys, in 1 case to sarcoma, and in 1 case to drowning. The death from drowning was a case of suicide which occurred while the patient was on leave from the asylum under the charge of her relatives. *Post-mortem* examinations were made in 9 cases.

The changes in the staff of attendants and servants are the resignation of 8, the dismissal of 1, and the engagement of 10.

The Register of Restraint and Seclusion contains 8 entries. They refer to the use of seclusion in the treatment of 4 patients. There have been 3 cases of escape in which the patients were absent for at least one night before being brought back to the asylum. There has been no accident except the case of drowning already referred to.

The state of the asylum and its inmates is very much as it was on the

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Aberdeen Royal Asylum.

occasion of the last visit. The overcrowding of the main building continues, but as the number of patients has not increased, it is no greater than it was at that time. The accommodation for the higher class of patients at Elmhill was found as usual in excellent order, and the patients are very satisfactorily provided for. The new hospital buildings are advancing towards completion, and they give promise of being admirably suited for their purpose. The contemplated addition to the buildings at the Daviot Branch Asylum have not been begun, but preparations are being made for their commencement early in spring.

It is learned with much satisfaction that the water supply at Daviot may now be regarded as adequate. It was found that there was a considerable leakage from the reservoir, and this having been remedied the available supply has been found abundant for the wants of the establishment. The reservoir can be kept full in ordinary weather by means of the steam pump at the laundry, and it is intended to supplement the supply from the pump by the hydraulic ram referred to in the preceding entry. As the reservoir has a capacity of about 235,000 gallons, there will thus be when it is full a store of water equal to two months supply for the establishment, at the rate of 40 gallons a day for each inmate, which is ample to provide against periods of drought or other emergencies.

The asylum is managed with great ability by Dr Reid and the treatment of the patients is kindly and judicious.

The books and registers were examined and were found regularly and correctly kept.

ABERDEEN ROYAL ASYLUM,
10th and 11th December 1895.

There are 743 patients on the register of the asylum at this date. Of these 114 males and 124 females are private patients, and 208 males and 297 females are paupers. There are 9 males and 3 females absent on statutory probation, so that there are at present 731 patients resident throughout the various sections of the asylum. Since last visit 6 males and 4 females have been transferred from the private to the pauper list, and 4 males and 1 female from the pauper to the private list.

The following changes in the population of the asylum have taken place since the date of last visit :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Admitted,	17	25	65	66	173
Discharged recovered,	5	15	15	29	64
Discharged unrecovered,	5	4	16	9	34
Dead,	10	4	21	9	44

The deaths are registered as due to diseases of the brain in 16 cases, to diseases of the lungs in 5 cases, to diseases of the heart in 4 cases, to phthisis pulmonalis in 3 cases, to influenza in 4 cases, to senile decay in 4 cases, to erysipelas, sarcoma, quinsy, tumour, Bright's disease, and asphyxia from coal gas, in 1 case each. *Post-mortem* examinations were made in 24 cases.

There are 21 entries in the Register of Restraint and Seclusion. These refer to the use of restraint in the treatment of 1 patient, and to the use of seclusion, for periods varying from 2 hours to a day, in the treatment of 7 patients on account of excitement and violence. Two escapes have occurred in which the patients were absent for at least one night before being brought back. Two accidents are recorded, one of which due to a fall, involved the fracture of the neck of the thigh bone, and the other was a case of fatal poisoning by coal gas. This patient, while in a single room, had in a fit of excitement torn off the architrave of the door, broken the plaster behind it, and torn out and severed a gas pipe. The patient was asphyxiated by the gas before the escape was observed. Inquiry was made into the circumstances of the death by the Procurator-Fiscal.

The overcrowding of the asylum continues to increase. The number of patients resident at this date is 36 more than at the date of last visit. Relief to this overcrowded condition will however be obtained when the hospital block is opened. This building is progressing rapidly towards completion,

and it is expected it will be ready for occupation in the early spring. Every detail in this building appears to have been carefully considered, and it promises to provide accommodation of a very high character for patients requiring hospital care and treatment. This is much required, as the present arrangements for the care of the sick are both inadequate in extent and unsatisfactory in character.

Appendix B.
Commissioners' Entries.
Royal and District Asylums.
Aberdeen Royal Asylum.

The additions to the principal building of the Daviot branch of the asylum, consisting of a dayroom for male patients, new kitchen and stores, bathroom and lavatory accommodation, are being rapidly pushed forward, and when completed, they will add considerably to the efficiency of this section of the asylum. Steam radiators have been placed in various parts of the house, and the temperature of all the rooms was at this date very satisfactory. The water supply is now abundant and of good quality. There are at present 50 men and 39 women in the Daviot branch, and they are admirably provided for. The farm and garden provide an abundance of healthy outdoor work of a varied character for the patients, which interests them and conduces to their contentment and physical well-being. The visit to the Daviot branch left a most pleasing impression.

The accommodation at Elmhill is excellent and the patients resident there are provided for in a liberal manner. It would be difficult to find in any other institution such excellent accommodation as exists at Elmhill at such moderate rates of board.

The asylum continues to perform a most charitable function in providing for private patients in straitened circumstances. No patient belonging to the County of Aberdeen, for whom the rate of £30 a year can be paid from private means, is refused admission. If such patients were not received in this asylum as private patients, they would either have to be left without asylum treatment, or their relatives would be driven to make application to the parochial authorities to deal with them as persons requiring public aid, and the patients would then have the stigma of pauperism attached to them. In receiving patients of this class as private patients the Directors of the asylum therefore do a great public service. There are at present 67 men and 59 women in the asylum whose rate of board does not exceed £30 a year, and of these there are 24 men and 18 women in whose case this rate is reduced, according to the necessities of each case, by contributions from charitable funds administered by the Directors. These facts are recorded with much satisfaction.

It was everywhere evident that the institution is managed with great care and marked ability. The patients are treated with kindness and consideration and their food is abundant, varied and well cooked.

The books and registers were examined and were found to be regularly and correctly kept.

ARGYLL AND BUTE DISTRICT ASYLUM,
28th February and 1st March 1895.

Argyll and Bute District Asylum.

There are 410 patients at present on the register of the asylum. Of these 13 men and 17 women are private patients, and 198 men and 182 women are paupers. Of the 380 paupers 314 are chargeable to parishes in Argyllshire, 63 to parishes in Buteshire, and 3 to parishes not in the Counties in the District. One male patient and one female have since last visit been transferred to the list of private patients. One man and three women, all paupers, are absent on probation, so that the number resident is 406.

The increase in the number on the register since 6th June 1894, when the asylum was last visited, is 15.

The following changes have taken place since the date of last visit :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Admitted,	5	3	32	27	67
Discharged recovered,	0	2	14	12	28
Discharged unrecovered,	1	1	4	6	12
Dead,	2	0	6	4	12

Of the 12 patients discharged unrecovered, 10 of whom were paupers, 4 were transferred to other institutions, and 8 were placed under care in private

Appendix B.
Commissioners' Entries.

Royal and District Asylums.

Argyll and Bute District Asylum.

dwellings. Praiseworthy efforts continue to be made by Dr Cameron to control the growth of the population by discharging those patients for whom asylum care and treatment appear to be no longer necessary. This is a policy which is advantageous both to the patients and to the ratepayers.

The deaths are registered as due in 3 cases to brain disease, in 5 cases to disease of the lungs, in 2 cases to consumption, in 1 case to aneurism, in 1 case to uraemic convulsions, and in 1 case to senile decay. *Post-mortem* examinations continue to be made when practicable, and the results are recorded with care and ability.

The Register of Restraint and Seclusion contained 6 entries referring to the seclusion for short periods of four female patients. There have been 6 accidents, one of which was a dislocation of the shoulder, and another a fracture of the neck of the femur, both due to falls. The other accidents were not of a serious character. There have been 3 escapes in which the patients were absent for a night before being brought back.

Sixteen attendants have resigned and eighteen have been engaged.

The condition of the asylum was found most satisfactory in all its departments. Considerable progress has been made with the painting and decoration of the wards, and the work has been well and tastefully done. The dayrooms and dormitories were found in excellent order and scrupulously clean. The asylum was everywhere comfortably heated, the temperature of the male and female infirmaries being from 61 to 64 degrees, Fahr.

The patients were warmly and tidily clothed, and their physical condition was indication of a satisfactory dietary. They were free from excitement and there were no complaints. The Case Books show that the bodily and mental condition of the patients is carefully studied, and that the medical treatment is conducted with skill and ability. The industrial occupation of the inmates receives every attention; but the means of employing the male patients in active outdoor work will be almost exhausted, when the road round the asylum grounds is completed. The land in the possession of the institution is small in amount, and the desirability of getting more land for the healthy employment of the male patients should be kept steadily in view.

Progress is being made with the new male infirmary, and it will be ready for occupation during the summer. This new hospital section will add to the efficiency of the asylum, as suitable and ample accommodation for the sick and infirm male patients has been a long felt want in the institution.

Everything seen during the visit reflected most creditably on the administration of the asylum. Dr Cameron is evidently most conscientious and painstaking in the performance of the duties devolving upon him. The books and registers were examined and were found regularly and correctly kept.

ARGYLL AND BUTE DISTRICT ASYLUM,
18th June 1895.

There are 415 patients at this date on the register of the asylum. Twelve male and 20 female patients are in the position of private patients, and 199 male and 184 female patients, are paupers. All are resident in the asylum and were seen during the visit except 2 male and 2 female pauper patients who are absent on probation.

The following changes have taken place since 28th February the date of last visit :—

PRIVATE PATIENTS. PAUPER PATIENTS.

	M.	F.	M.	F.	TOTALS.
Admitted,	1	3	10	11	25
Discharged recovered,	1	—	2	4	7
Discharged unrecovered,	—	—	1	0	1
Dead,	1	—	6	5	12

The deaths are registered as due to brain disease in 1 case, to heart disease in 1 case, to disease of the lungs in 7 cases, to bowel disease in 1 case, to exhaustion from melancholia in 1 case, and to senile decay in 1 case.

In 4 cases the disease of the lungs which proved fatal, was consequent on an attack of influenza. *Post-mortem* examinations were made in 7 cases.

The number of admissions exceeds the number of discharges and deaths by 5, and the total number on the register is thus 5 more than it was at the date of last visit.

The changes on the staff of attendants and servants have been 3 ; 3 having resigned and 3 having been engaged to fill their places. Appendix B.

The Register of Restraint and Seclusion contains 2 entries, restraint having been used once in each case in the treatment of 2 patients. Three patients who escaped were absent over night before being brought back to the asylum. Commissioners' Entries.

The patients are skilfully and kindly treated, and their wants are adequately supplied. The dayrooms and dormitories were found in excellent order ; those in the East House attracted special attention as deserving of commendation. Royal and District Asylums.
Argyll and Bute District Asylum.

The dayrooms on the female side of the main building are at present overcrowded owing to the female workroom being kept empty, the upper part of the chimney stalk immediately beside it having become insecure. This is to be remedied as soon as possible.

The additional buildings intended to enlarge and improve the hospital accommodation on the male side of the main block are approaching completion, and will probably be completed in the course of the present year.

The road round the upper part of the grounds has now been finished. It is an excellent piece of work, and it provides in an admirable way for the exercise of the patients. The whole round is about a mile in length, and it has been so planned that it affords beautiful and interesting variety of scenery.

It is understood with much satisfaction that the District Board contemplate at the earliest opportunity to obtain additional land. The completion of the new road makes it more than ever desirable that this should be done.

The books and registers were examined and were found regularly and correctly kept.

AYR DISTRICT ASYLUM, Ayr District Asylum.
9th April 1895.

There are 198 men and 237 women at present on the register of the asylum. Of these 10 men and 3 women are absent on probation. There are thus 188 men and 234 women, or 422 patients in all resident at this date. Since the asylum was last visited there is an increase of 9 patients on the register.

The following changes have taken place since 12th October 1894, the date of last visit :—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	40	35	75
Discharged recovered,	15	10	25
Discharged unrecovered,	8	6	14
Dead,	15	12	27

The deaths are registered as due in 10 cases to brain disease, in 5 cases to pneumonia or bronchitis, in 4 cases to heart disease, in 2 cases to Bright's disease, in 2 cases to consumption, and in 1 case each to intestinal obstruction, diarrhoea, cancer, and shock from burns. The burns just referred to were sustained previous to admission, and the patient only lived 3 days after admission. *Post-mortem* examinations were made in 17 cases.

The Register of Restraint and Seclusion contains 21 entries. These refer to the use of seclusion on 18 occasions in the treatment of 6 patients, and to the use of restraint on 3 occasions, in 1 case for surgical reasons. There have been 2 escapes in which the patients were absent over night before being brought back. The register of accidents contains 1 entry referring to a fracture of the left leg of a male patient from slipping on the floor during a struggle with an attendant. No blame was attached to the attendant in connection with the accident. Twelve attendants have resigned, 2 have been dismissed, 1 absconded, and 17 have been engaged.

The patients were found suitably clothed, and their general health and physical condition indicated a sufficient dietary. They are evidently treated with much kindness and consideration. Their industrial employment receives every attention. Fifty-seven per cent. of the men and 81 per cent. of the women are registered as being daily engaged in useful work. The laundry has been enlarged and improved, and machinery has been added which has increased the efficiency of the work done in this department.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Ayr District Asylum.

The new extensions to the main buildings are now in full occupation, and they provide accommodation of a very satisfactory character. The painting and papering in these extensions have been executed with much taste, and the dayrooms and dormitories have been most comfortably furnished. It was noted with satisfaction that there was a large number of easy chairs for infirm and aged patients. Surroundings and comfort such as exist in these extensions inevitably lead to orderly and sane behaviour, and to contentment on the part of the patients.

As has been stated in previous entries, it was not expected that these extensions would do more than relieve the overcrowding which existed in the asylum, and it is now found that they scarcely do even this. There are 7 more male patients and 20 more female patients at present in the asylum than it can properly accommodate. When the separate hospital for contagious diseases is completed, accommodation for 24 women will be available as long as its services as a contagious hospital are not required. There is thus no provision for the further growth of the asylum population, and as the annual admission rate has increased during the last three years from an average of 120 to 153—the admissions for the year ending 31st March 1895 were 171—overcrowding will again inevitably ensue at an early date. There has been an increase of 52 patients in the asylum within the last three years. The attention of the District Board is directed to this matter, and it is recommended that there should be no delay in making provision for the prospective growth of the asylum population.

Efforts have been made by Dr Skae to board out those patients who no longer require asylum care and treatment, and there are at present 13 patients out on probation with a view to test their fitness for domestic care. It is understood that parochial authorities in Ayrshire have experienced a difficulty in providing for the harmless insane outside the asylum. It is known however, that suitable accommodation can be found if it is looked for. The parochial officials of a large parish in Glasgow have found suitable guardians and homes for a large number of their quiet, harmless, and easily managed insane in two parishes in Ayrshire, and it is therefore reasonable to expect that Inspectors of poor of the county could, if earnest endeavours were made, provide in a like manner for similar cases. The efforts to board out suitable patients should therefore be maintained as it is only by such measures that an inordinate growth of the asylum population can be prevented.

The books and registers were examined and were found regularly and correctly kept.

AYR DISTRICT ASYLUM,
7th November 1895.

There are 446 patients—206 men and 240 women—on the asylum register at this date. Of these, there are 13 men and 10 women absent on statutory probation, 2 men absent on pass, and 1 man absent by escape. The number actually resident is therefore 420, 190 being men, and 230 being women. The numbers resident on 9th April, the date of last visit, were 188 men and 234 women. The number of men has thus increased by 2, and the number of women has decreased by 4. The position of the asylum therefore, as regards the adequacy of its accommodation to meet the wants of the District, remains without great change; the accommodation for females is almost fully occupied, and the accommodation for males continues more than fully occupied.

The following changes have taken place since last visit:—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	45	49	94
Discharged recovered,	14	16	30
Discharged unrecovered,	18	14	32
Dead,	5	16	21

The deaths are registered as due in 3 cases to diseases of the brain, in 5 to diseases of the heart, in 6 to diseases of the lungs, and in 3 to exhaustion from mania; 4 deaths were due to nephritis, strumous abscesses, intestinal hæmorrhage, and a burn. The burn happened previous to the admission of the patient to the asylum. *Post-mortem* examinations were made in 8 cases.

The Register of Restraint and Seclusion contains 27 entries. They refer to

the use of the camisole in 4 cases to prevent attempts at suicide, and to the use of seclusion in the treatment of 2 patients. There has been no accident to any patient. Five patients who escaped were absent for at least one night before being brought back.

The patients were found in a satisfactory condition. Their clothing was suitable and in good order; an abundant and excellent dinner was served during the visit, and no complaint was made as to treatment.

As was stated in the preceding entry the extensions of the building which were opened for the reception of patients early in the present year, provide very satisfactory accommodation for patients. The separate hospital intended, when occasion arises, for cases of infectious disease has been completed since last visit, and it is also well suited for its purpose. It is at present occupied by a group of the more easily managed female patients. The furnishing of all the new buildings has been done extremely well, and the District Board are to be commended for the good judgment and liberality which they have shown. The effect on the patients of the relief from overcrowding, which has resulted from the opening of the new buildings, is very marked and very gratifying.

The overcrowding from which the patients recently suffered was a source of much disquietude for several years, and it may be expected that the patients will now be not only more contented and more easily managed, but that the recovery of the curable patients will be effectively promoted. It has been pointed out, however, in preceding entries, that the recent extensions do not provide for any increase that may take place in the number of inmates, and it is therefore necessary in the light of recent experience, that the District Board should at once take steps to make a further extension of the asylum, in order to prevent a recurrence of the overcrowding which is so injurious in its effects. The District Board may not unnaturally be reluctant to undertake the erection of additional buildings so soon after the completion of the recent extensions, but it cannot fail to be recognised that this step is inevitable. Since the year 1890, when attention was first called in these entries to the overcrowding of the asylum which necessitated the recent extensions, the number of inmates has increased by 120; and there is no reason to hope that the rate of increase will be much less in the immediate future. The necessity for prompt action is therefore strongly pressed on the District Board, who will no doubt give the matter due attention.

The importance of discharging patients as soon as they cease to require asylum detention should be carefully kept in view, and the unnecessary accumulation of patients in the asylum avoided. But even if this removal of patients suitable for private dwellings is more successfully carried out in the future, than it has been in the past, the necessity for additional building will not be averted.

The books and registers were examined, and were found regularly and correctly kept.

BANFF DISTRICT ASYLUM, Banff District
17th January 1895. Asylum.

There are 149 patients on the register of the asylum at present. Two women are private patients, and 72 men and 75 women are paupers. All are resident and were seen to-day except 1 man who is absent on probation.

Since 11th July, the date of last visit, 13 men and 14 women have been admitted, 3 men and 4 women have been discharged recovered, 3 men and 2 women have been discharged unrecovered, and 1 man has died. The death is registered as due to general paralysis.

The only change in the staff of attendants and servants has been the resignation of 1 attendant and the appointment of 1 to fill her place.

The Register of Restraint and Seclusion contains no entry. There has been no accident. There have, however, been two cases of escape in which the patients were absent for at least one night before being brought back.

The patients were found in a satisfactory condition being suitably clothed, well nourished, and having their comforts and requirements well provided for.

The dayrooms and dormitories were everywhere in good order, suitably heated, and well aired.

The books and registers were examined, and were found regularly and correctly kept.

Appendix B.
Commissioners
Entries.

Royal and
District
Asylums.

Ayr District
Asylum.

Appendix B.

BANFF DISTRICT ASYLUM,
22nd August 1895.Commissioners'
Entries.Royal and
District
Asylums.Banff District
Asylum.

There are 147 patients, 73 men and 74 women, on the register of the asylum at this date. One man and 1 woman are private patients, and 72 men and 73 women are paupers. One woman is absent on pass, so that there are 146 patients resident.

Since the date of last visit, 17th January 1895, 8 men and 12 women have been admitted, 3 men and 6 women have been discharged recovered, 1 man and 2 women have been discharged unrecovered, and 3 men and 7 women have died. The deaths are registered as due to general paralysis in 1 case, to apoplexy in 1 case, to pneumonia in 2 cases, to influenza in 2 cases, to consumption in 2 cases, to heart disease in 1 case, and to tuberculosis in 1 case. A *post-mortem* examination was made in 7 out of 10 cases.

The Register of Restraint and Seclusion contains 1 entry referring to the use of seclusion for 8 hours in the case of a patient whose maniacal excitement was dangerous to others. There have been no escapes or accidents. Two attendants have resigned and two have entered the service of the asylum.

Four female patients from Woodpark are at present in the isolated hospital suffering from typhoid fever. They are under the charge of a trained nurse, and they are so far progressing favourably. The cause of the fever has been investigated by Dr Fergusson and by the sanitary officials of the county. It is believed that an open sewage drain at the west boundary of the asylum ground at Woodpark is the cause of the outbreak, and it is understood that those responsible for this open drain have been called upon to lay a pipe for the conveyance of the sewage into the drainage of the district.

With the exception of these patients the general health of the inmates is good, and their physical condition indicates a liberal dietary. The clothing of the female patients is very satisfactory, but that of the male patients is less so. It is recommended that a tailor attendant be added to the staff, in order that the clothing of the male patients be kept in thorough repair. The patients were entirely free from excitement, and there were no complaints.

The dayrooms and dormitories were scrupulously clean and in excellent order. The furniture in the dayrooms consists only of benches. It is recommended that a few sofas, arm-chairs and ordinary chairs be supplied to the dayrooms. Such additions to the furniture would give comfort and rest to aged, infirm, and feeble patients, and to those who have worked hard during the day.

It is understood that the question of uniform for the female attendants is being considered by the District Board. It is now usual in asylums for the female attendants to be dressed like nurses, and this is not only pleasing in appearance, but has been found to have a beneficial effect in many ways. The adoption of a uniform for the female attendants is recommended.

The industrial employment of the inmates continues to be a prominent feature in the treatment of the patients in this asylum. Healthy and interesting occupations never fail to conduce to their contentment and physical well-being. One hundred and twenty-five out of 146 patients are registered as being industrially employed.

The asylum continues to be managed in an able, energetic and conscientious manner, and the patients are evidently well cared for and kindly treated.

The books and registers were examined and found to be regularly and correctly kept.

Crichton
Royal
Institution,
Dumfries.CRICHTON ROYAL INSTITUTION, DUMFRIES,
11th, 12th, and 13th April 1895.

There are 1006 patients under certificates at present on the register of the institution. The following statement shows the numbers and position of these patients.

	M.	F.	TOTALS.
Private Patients, . . .	176	180	356
Pauper Patients, . . .	325	325	650
	501	505	1006

Of these 1 male private patient is absent on statutory probation. Since last visit 2 males and 2 females have been transferred from the pauper to the private list.

The following changes have taken place among the certified patients since Appendix B. the 21st May 1894, the date of last visit.

	PRIVATE.		PAUPER.		TOTALS.	Commissioners' Entries.	Royal and District Asylums.
	M.	F.	M.	F.			
Admitted,	47	45	95	104	291		
Discharged recovered,	14	21	27	38	100		
Discharged unrecovered,	9	12	19	20	60		
Dead,	5	5	23	28	61		

Crichton
Royal
Institution
Dumfries.

There has thus been an increase of 26 among the private patients, and of 44 among the paupers.

The number of pauper patients chargeable to the parishes comprised within the Dumfries Lunacy District, which includes the Counties of Dumfries, Kirkcudbright, and Wigtown, is 296, and the number chargeable to parishes beyond the District is 354.

The changes which have occurred among the voluntary patients since last visit are as follows :—

	M.	F.	TOTALS.
Admitted,	12	2	14
Left,	10	12	22
Dead,	2	0	2

There are at this date 12 gentlemen and 10 ladies resident as voluntary inmates.

The deaths are registered as due in 25 cases to brain disease, in 6 cases to heart disease, in 7 cases to consumption, in 8 cases to pneumonia or bronchitis, in 5 cases to diseases of the alimentary tract, in 2 cases to Bright's disease, in 2 cases to senile decay, and in 1 case each to ear disease, carbuncle, cancer, ovarian disease, cut-throat and accident. In the case of the death from cut-throat the wound was self-inflicted previous to admission, and in the case of the death from accident the patient was killed by a tree falling on him in Kinmount grounds during a storm of wind. *Post-mortem* examinations were made in 15 cases.

The only entry in the Register of Restraint and Seclusion refers to the use of seclusion in the treatment of a patient. There have been 7 escapes in which the patients were absent over night before being brought back. Besides the two fatal accidents already referred to, there have been two which involved fracture of bones. Sixteen attendants or servants have resigned, 1 was dismissed, and 17 have been engaged.

The patients were found well provided for in every section of the institution. Their general contentment was a most noteworthy feature, and no complaint of a reasonable character was made by any patient of their treatment. There was no excitement except in the case of one patient who had been recently admitted. The population of the institution is distributed among the various houses in the following manner :—

	Voluntary.		Private.		Pauper.		Totals.
	M.	F.	M.	F.	M.	F.	
First House,	11	8	121	69	...	...	209
Second House, . . . . .	...	2	36	71	309	276	694
Kinmount,	1	...	12	10	16	40	79
Maryfield, . . . . .	...	...	...	12	...	3	15
Midpark, . . . . .	...	...	...	18	...	6	24
Hannahfield, . . . . .	...	...	6	...	...	...	6
	12	10	175	180	325	325	1027

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Crichton Royal Institution, Dumfries.

The segregation of the patients in this manner has many advantages, confers benefits and privileges and contributes largely to their mental and physical well-being. It affords facilities for providing the various classes of patients with such surroundings as they may require either for their supervision and safety, or for the enjoyment of that amount of liberty which their mental condition entitles them to have.

The industrial occupation of the patients receives every attention, and all who are able and willing to engage in useful work are fully employed. The large extent of land in the possession of the institution constitutes a therapeutic agent of the highest value, as it affords abundant and varied work for the inmates.

All parts of the institution were found in excellent order. The Second House is overcrowded, especially on the male side, but the intelligent supervision exercised over the patients in this section renders the results as satisfactory as can be expected under the circumstances.

The administration of the institution is characterised by remarkable energy and ability. Dr Rutherford's zeal and activity in the performance of his duties inspire the whole staff, and thus lead to earnest efforts being made to render every department as efficient as possible. A new feature in the medical staff has been introduced by the appointment of Dr Margaret Dewar as Medical Officer to the ladies division of the First House. Her services are it is understood very acceptable to the patients, and she is said to exhibit high professional attainments in her treatment of the patients, and to be an earnest worker in therapeutical investigations.

The buildings are now in process of erection which are to contain the machinery for the production of the electric light, which is to be installed into every section of the institution.

Extensions and improvements of an important character have it is understood been resolved upon by the Directors. In addition to the First and Second Houses at present existing,—a Third House is to be erected to accommodate from 180 to 200 pauper patients; and it is proposed that it shall be largely of the character of a hospital for the acute and sick. The erection of this Third House will permit of the emptying of the male section of the Second House, which in the character of its accommodation is out of harmony with the rest of the institution. This section will then be rebuilt in an improved form, and it is proposed in the future to devote the whole of the Second House to the accommodation of the private patients at the lower rates of board. A new laundry block is to be built to accommodate 40 chronic and useful female pauper patients. The farm buildings are to be made to accommodate 80 chronic and useful male pauper patients. These extensions will provide for 300 pauper lunatics in all, which it is hoped will provide sufficiently for the pauper lunacy of the district.

The books and registers were examined and were found kept with great care and regularity.

CRICHTON ROYAL INSTITUTION, DUMFRIES,
11th, 12th, and 14th November 1895.

There are 893 patients now on the registers of the institution. The following statement shows the numbers, distinguishing certificated patients from voluntary inmates, males from females, and private patients from paupers:—

I. Certificated Patients—	M.	F.	TOTALS.
(1) Private,	185	192	377
(2) Pauper,	255	237	492
II. Voluntary Inmates,	12	12	24
	452	441	893

All the patients on the registers are resident except 3 ladies who are absent on statutory probation.

Since 11th April, the date to which the numbers in the preceding entry refer, the following changes have taken place :—

	PRIVATE.		PAUPER.		TOTALS.	Commissioners' Entries.
	M.	F.	M.	F.		
I. Certificated Patients—						Royal and District Asylums.
Admitted,	41	39	36	26	142	
Discharged recovered,	20	8	22	21	71	
Discharged unrecovered,	6	7	64	85	162	
Dead,	6	10	20	10	46	
II. Voluntary Inmates—						Crichton Royal Institution, Dumfries.
Admitted,	9	7	—	—	16	
Left,	8	5	—	—	13	
Dead,	1	—	—	—	1	

During the period to which these numbers refer, 2 female patients have been transferred from the private to the pauper list.

The figures show an increase since last visit in the number of private patients and voluntary inmates by 23, and a decrease in the number of pauper patients by 158. The large decrease in the number of pauper patients is due to the removal of Lanarkshire paupers consequent on the opening of the new Lanark District Asylum at Hartwood.

The deaths are registered as due to diseases of the nervous centres in 22 cases, to diseases of the heart in 4 cases, to diseases of the lungs in 12 cases, to diseases of abdominal viscera in 3 cases, to various forms of mania in 3 cases, to senile decay in 1 case, to drowning in 1 case, and to narcotic poisoning in 1 case. *Post-mortem* examinations were made in 5 cases.

The Register of Restraint and Seclusion contains 7 entries. They refer to the use of mechanical restraint in 2 cases and to the use of seclusion in the treatment of 3 cases. There has been no case of escape in which the patient was not brought back the same day. There have been 2 fatal accidents, the cases of drowning and narcotic poisoning already mentioned among the deaths. The former occurred while bathing and was not believed to be suicidal: the other which occurred in the case of a voluntary inmate was due to suicidal impulse.

During the three days occupied by the visit all parts of the institution were inspected, and the patients were found everywhere well provided for. The separate villas and mansion houses, as usual, attracted attention by the way in which those resident in them obtain the advantages of a comfortable home free from arrangements suggestive of asylum detention, while remaining under skilled medical supervision and the care of trained attendants. All parts of the institution were found in excellent order and are admirably suited to their purposes except the male side of the Second House, which it has been indicated in preceding entries, is out of harmony with the rest, but which is to undergo extensive alterations at an early date.

The institution continues to be managed with great energy and ability. Dr Rutherford makes the impress of his powerful personality felt in every department of the administration with the most satisfactory results. He is distinguished for the broad and enlightened views which he takes of the treatment of insanity, and his mode of dealing with his patients is well adapted to obtain the improvement of their mental condition and to promote their comfort and physical well being.

Much is done in the institution to vary the monotony of asylum life, and to relieve the irksomeness of institutional routine. Employment in healthy and congenial occupation either in the shape of industrial work or otherwise as may be best suited to the position and habits of the patients continues to be a prominent and excellent feature in the mode of management. And the abundance of out door life, which is enjoyed especially by the male patients of the Second House does much to counteract the disadvantages arising from the defective and antiquated character of its arrangements.

An addition has been recently made to the resources of the establishment by the purchase of the mansion and estate of Friar's Carse which formerly belonged to Mr Crichton the founder of the institution. The mansion is in excellent order and is handsomely furnished; and it affords accommodation

62 Appendix to the Thirty-eighth Report of the General Board of

Appendix B. of the highest class for patients who can benefit by a residence amid charming scenery and with all the advantages of extensive and beautiful grounds.
Commissioners' Entries. The books and registers were examined and were found regularly and correctly kept.

Royal and District Asylums.

DUNDEE ROYAL ASYLUM,
8th January 1895.

Dundee Royal Asylum.

There are 420 patients on the registers of the asylum. Of these 41 men and 41 women are private patients, and 132 men and 206 women are paupers. All are under certificates except 1 male and 1 female, private patients, who are voluntary inmates.

Since 10th July, the date of last visit, the following changes have taken place :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		
	M.	F.	M.	F.	TOTALS.
Admitted,	8	11	30	36	85
Discharged recovered, . .	—	2	8	14	24
Discharged unrecovered, .	2	6	17	13	38
Dead,	3	2	16	6	27

The deaths are registered as due to diseases of the brain in 10 cases, to diseases of the heart in 2 cases, to diseases of the lungs in 7 cases, to strangulated hernia in 2 cases, to peritonitis in 1 case, to epithelioma in 1 case, and to senile decay in 4 cases. One patient registered as dying from epilepsy was found dead in bed, having died unobserved, apparently during a fit. The case was reported to the Procurator-Fiscal. *Post-mortem* examinations were made in 16 cases.

As indicative of the serious nature of the diseases which a large proportion of the patients admitted to the asylum suffer from, it is noted the seven of the patients registered as dying from brain disease were admitted during the past year.

The following changes have taken place in the staff of attendants and servants :—13 engaged, 11 resigned, and 2 dismissed.

The Register of Restraint and Seclusion contains no entry. Four accidents are recorded, all involving fracture of bones. There have been 6 cases of escape in which the patients were absent for at least one night before being brought back.

Eleven male and 8 female patients are registered as wet at night, and 48 male and 64 female patients are raised from bed by the night attendants on account of wet or dirty habits.

In view of the size of the asylum, and the large number of patients requiring special attention during the night, the present staff of 1 male and 1 female night attendant for the pauper patients is too small. With a larger staff such occurrences as the unobserved death of the epileptic patient already referred to might be prevented. It is recommended that at least one additional night attendant for each side of the asylum should be engaged.

The asylum was found in good order. The rooms and corridors were comfortably heated and well aired. The clothing of the male patients, which attracted unfavourable attention at last visit, was found more satisfactory.

The mansion of Gray House in which it is intended to place the higher class of private patients, is not yet occupied ; but it is expected to be ready for the reception of patients at an early date. When the patients are transferred to Gray House a certain amount of the accommodation in the main building will be vacated, and an opportunity will be given for the desirable rearrangement of the dayrooms and dormitories on the female side, which would provide suitable and efficient hospital accommodation for the women. The other improvements previously recommended should also be carried out as soon as possible, such as the reconstruction of the water closets and lavatories not yet dealt with, the carrying of partitions through the roof so as to divide the building into fire-proof compartments, and the erection of a suitable chapel.

The appointment of an additional assistant medical officer is again recommended.

The books and registers of the asylum were examined and were found regularly and correctly kept.

DUNDEE ROYAL ASYLUM, Appendix B.
29th August 1895.

Commissioners' Entries.

Royal and District Asylums.

Dundee Royal Asylum.

There are 411 patients on the register of the asylum at this date. Of these, 43 men and 43 women are private patients, and 124 men and 201 women are paupers. One private male patient and 1 pauper female patient are absent on statutory probation, so that there are 409 patients at present resident in the asylum. Since last visit, 1 female patient has been transferred from the pauper to the private list.

The following statement shows the changes in the population since last visit :—

	PRIVATE.		PAUPER.		TOTALS.
	M.	F.	M.	F.	
Admitted, . . .	10	7	37	44	98
Discharged recovered, . . .	1	0	10	20	31
Discharged unrecovered, . . .	4	3	19	14	40
Dead,	4	2	14	14	34

Of the voluntary inmates, 1 female patient has been admitted, 2 female patients have left, and there is at present 1 voluntary male patient resident.

The deaths are registered as due to general paralysis in 7 cases, to other forms of brain disease in 6 cases, to heart disease in 4 cases, to consumption and other forms of tuberculosis in 7 cases, to pneumonia and bronchitis in 4 cases, and to influenza, cancer, marasmus, septicaemia, exhaustion, and senile decay in 1 case each. *Post-mortem* examinations were made in 23 cases, and the results of these examinations are recorded with fulness and ability.

The Register of Restraint and Seclusion contains no entry. There have been 5 escapes in which the patients were absent for at least one night before being brought back. Two accidents are recorded, both involving the fracture of a bone, one of which was due to a fall, and the other to a struggle during maniacal excitement. The changes among the staff consist of the resignations of 27 attendants, the death of 1, the dismissal of 1, and the engagement of 36.

The patients were found in a satisfactory condition. There was little excitement during the visit, and none of the patients made any reasonable complaint. The clothing has been greatly improved, and this cannot fail to have a beneficial effect on the behaviour of the patients. Industrial occupation is well attended to—there are 88 men and 146 women registered as being regularly employed in useful work. The mental and bodily condition of each patient is most carefully studied, and the records in the Case Books show how minutely these investigations are made. In view of a largely increased admission rate, of the great amount of work involved in these medical records and of the desirability of extending pathological research, it is again recommended that the medical staff be increased by the appointment of an additional assistant.

The institution was found very clean, well ventilated, and in good order. A considerable amount of painting and decorating has been done, and the work has been executed with good taste. The furniture and furnishings have been improved, and the wards present a bright, cheerful, and comfortable appearance. The floors and walls of several of the water-closets have been tiled, and it is understood with satisfaction that the bathrooms and the general lavatories and water-closets are to be tiled in a similar manner. The asylum has not yet been divided into fire-proof sections by carrying the partitions through the roof.

An improvement of a great and important character has been effected by a rearrangement of the dayrooms and dormitories in the female division. The block originally intended to accommodate patients working in the laundry has been discontinued as hospital accommodation, and is now used as sleeping accommodation for easily managed patients. The large dayroom in the south-east corner of the main building has been converted into a dayroom dormitory for the sick female patients, and for those who require special attention and supervision. This rearrangement has provided suitable and efficient accommodation of a hospital character for the female patients.

Two additions are about to be made, one on the male side, and one on the female, for the purpose of providing observation dormitories for epileptic, paralytic and suicidal patients. They are to be attached to the north end of

Appendix B. the wings of the main building, and it is to be regretted that they will shut up the courts on the east and west sides.

Commissioners' Entries. The mansion of Gray House is now occupied by 20 patients. The accommodation of this mansion is excellent, and devoid of special asylum features. It is most comfortably and elegantly furnished, and it will be found a valuable addition to the resources of the asylum. It provides in an admirable manner for patients paying the higher rates of board, and it is hoped that the possession of Gray House will lead to a larger number of such patients being received. The life of the inmates in this mansion is similar to that of ladies and gentlemen at their own homes.

Royal and District Asylums.

Dundee Royal Asylum.

Divine service has at present to be conducted in one of the dayrooms in the female division, which does not afford accommodation for all the patients who could attend. It is therefore recommended that the erection of a suitable chapel in the grounds be considered at an early date by the Directors.

The books and registers were examined and were found regularly and correctly kept.

Royal Edinburgh Asylum.

ROYAL EDINBURGH ASYLUM,
5th, 6th, and 7th February 1895.

There are 878 patients on the registers of the asylum. Of these there are under certificates 188 male and 167 female private patients, and 256 male and 260 female pauper patients. Five gentlemen and 2 ladies are voluntary inmates not under certificates. All are resident in the asylum and were seen except 6 gentlemen and 4 ladies who are at the seaside villa, and 2 male and 5 female private patients who are absent on statutory probation.

The following changes have taken place among the certificated patients since 3rd July, the date of the statistics given in the preceding entry :—

PRIVATE PATIENTS. PAUPER PATIENTS.

	M.	F.	M.	F.	TOTALS.
Admitted,	19	27	99	107	252
Discharged recovered,	6	8	36	42	92
Discharged unrecovered,	9	10	30	42	91
Dead,	5	3	28	28	64

Besides these changes 1 gentleman has been admitted as a voluntary inmate, and 1 gentleman and 4 ladies, who were voluntary inmates, have left.

During the period to which the above figures refer, 1 male and 2 female patients have been transferred from the private to the pauper list, and 4 males and 7 females have been transferred from the pauper to the private list.

In the Register of Deaths brain disease is given either as the cause, or as a contributory cause, of death in 55 cases; 20 of these being cases of general paralysis. Tubercular disease is given as one of the causes of death in 12 cases. One death was due to drowning. The number of deaths from general paralysis is remarkable, being equivalent to a death rate from that cause alone during the last seven months of 4 per cent., per annum on the number of patients resident. The average ages at death from all causes were 46 for men and 59 for women. *Post-mortem* examinations were made in 54 cases.

The changes among the staff of attendants and servants are 28 resignations, 5 dismissals, and 40 engagements.

The Register of Restraint and Seclusion contains 183 entries. They refer to the use of mechanical restraint in the treatment of 1 patient, and to the use of seclusion in the treatment of 7 patients. There have been 6 cases of escape in which the patients were absent over night before being brought back. There are 7 entries in the Register of Accidents. The most serious of these are one of injury to the hip joint of a patient from a fall, and the case of drowning already mentioned. The death from drowning occurred in the case of a male patient who was found drowned in the asylum curling pond where the water is only a foot and a half deep. The patient was in the enjoyment of parole at the time and was not supposed to have any suicidal tendency.

The management of the asylum and the treatment of the patients continue to be conducted with great ability and much success. The case of each patient receives careful study and skilful treatment; the general comforts of the patients are well attended to; and the administration is conducted in a way

which secures healthy occupation and recreation for those who are capable of benefiting by them. Appendix B.

The establishment was found everywhere in excellent order.

Commissioners' Entries.

The transference of patients from the East House to New Craig House is to begin immediately, and it is thus probable that before long the building, a part of which was the original Edinburgh Lunatic Asylum, will be left dismantled and disused. This building received its first patient on the 19th of July 1813, and there may still be traced in its construction and arrangements, many of the phases through which the treatment of the insane has passed in its progress from the coercive and mistaken methods practised at the period of its foundation to the mild and more efficient methods of the present day. One feels a touch of regret at parting with a fabric round which has gathered so much that is interesting in the history of the treatment of insanity. But this feeling must give place to the gratification which a visit to the establishment at New Craig House produces. The provision which is made there for the comfort and curative treatment of the patients is of the highest excellence, and far transcends anything that the benevolent founders of the asylum eighty years ago could have imagined. When the asylum is next visited the building may be expected to be occupied and the new arrangements in full operation.

Royal and District Asylums.

Royal Edinburgh Asylum.

The books and registers of the asylum were examined and were found regularly and correctly kept.

ROYAL EDINBURGH ASYLUM,
9th, 10th, and 11th October 1895.

There are 891 certificated patients on the register of the asylum at this date. Of these 186 men and 182 women are private patients and 244 men and 279 women are paupers. There are 2 gentlemen and 5 ladies absent on probation and 1 lady absent on pass, so that there are 883 certificated patients resident. In addition to these there are 5 gentlemen and 4 ladies who are voluntary inmates, making in all a total of 892 persons resident. Since last visit 1 male and 1 female have been transferred from the private to the pauper list, and 5 males and 5 females from the pauper to the private list.

The following statement shows the changes which have taken place in the population since the date of last visit :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		
I. Certificated Patients—	M.	F.	M.	F.	TOTALS.
Admitted,	23	39	92	121	275
Discharged recovered,	14	13	39	45	111
Discharged unrecovered,	6	8	34	37	85
Dead,	9	7	27	16	59
II. Voluntary Inmates—					
Admitted,	4	3	—	—	7
Left,	4	1	—	—	5

The deaths are registered as due to brain disease in 24 cases, to lung diseases in 7 cases, to heart disease in 7 cases, to tubercular diseases, including phthisis pulmonalis in 11 cases, to senile decay in 5 cases, to intestinal disease in 2 cases, and to kidney disease, cancer, and variola in 1 case each. In the cases of 40 of the 59 patients who died, a *post-mortem* examination was made, and the results of these examinations are recorded with fulness and scientific accuracy. Pathological research continues to be an important feature in the scientific work carried on in the institution.

The Register of Restraint and Seclusion contains 140 entries referring to the use of restraint in the treatment of 1 patient and to the use of seclusion in the treatment of 8 patients. Three accidents are recorded, one of which was an attempt at suicide by swallowing disinfecting powder, and the other two, involving fracture of bones, were due to falls. There have been 14 escapes in which the patients were absent overnight before being brought back.

The changes in the staff consist in the engagement of 71 attendants and servants, the dismissal of 5 and the resignation of 43.

An important event in the history of the institution has taken place since last visit in the completion and occupation of Craig House. The lady patients

Appendix B.
Commissioners' Entries.

Royal and District Asylums.

Royal Edinburgh Asylum.

were transferred to it on the 20th March 1895 and the gentlemen on the 20th May. Externally this building is imposing and attractive, and internally it may be said to be a masterpiece in design as an asylum for the upper and middle classes. All its arrangements have been planned with great care and ability, and it is pleasing to observe how every detail has been designed with a view to the efficient care of the inmates and the successful administration of the institution. To the south of the central hall, which is large, lofty and richly decorated, are the drawing-room and billiard-room, and to the north are the five dining-rooms. The buildings, which run east and west and have wings to the south, consist of three storeys; the first and second contain four wards, and the third consists of bedrooms. To the west of Craig House are the hospital for gentlemen and a villa called Queen's Craig; these are connected so as to have billiard and other rooms in common. To the east is the hospital for ladies. The whole of the buildings are lighted by the electric light. The heating arrangements consist of open fires and hot water pipes. The sanitary arrangements are of the most recent and efficient kind. The furniture and furnishings throughout all these buildings are handsome and elegant, and the decoration is rich and in excellent taste. Nothing has been left undone which would secure the comfort, safety and well-being of the patients. Such pleasant and cheerful surroundings as exist in Craig House, and the adjacent villas cannot fail to have a most beneficial influence on the mental and bodily condition of the patients, and to make their life as happy as it is possible to be during their mental illness. The prediction made in a former entry that when Craig House, and the adjacent villas were completed, Scotland would possess an asylum for high class patients which would not have its equal anywhere, has, it will be readily acknowledged been fulfilled.

The population of the institution is at present distributed among its sections in the following manner :—

	Private Patients.		Pauper Patients.		Totals.
	M.	F.	M.	F.	
West House,	102	84	244	275	705
Myreside,	6	...	...	...	6
Craig House,	51	52	...	...	103
Old Craig House,	7	4	...	...	11
South Craig, . . . .	...	17	...	...	17
Bevan Villa, . . . .	...	14	...	...	14
Ladies' Hospital, . . . .	...	7	...	...	7
Gentlemen's Hospital,	9	...	...	...	9
Queen's Craig,	9	...	...	...	9
Seaside Villa, Cockenzie,	3	4	2	2	11

The possession of these separate buildings affords means for classifying the patients according to their social and mental condition, and it also affords facilities for conferring benefits and privileges upon them suitable to their mental condition.

The wards in every section of the asylum were found in excellent order, scrupulously clean and well ventilated, and the condition of the patients was most satisfactory. The case of each patient is made a matter of special study, and the Case Books show that everything is done which medical science indicates in order to promote recovery. The nursing of the sick and infirm in the hospital sections is of a high standard of efficiency. The patients generally bore every evidence of being well cared for, and no efforts are spared to secure that they should be kindly and considerately treated. Their food, exercise and occupation receive every attention. The efficient condition of the institution shows that it is managed by Dr Clouston with great energy and ability. It is understood with satisfaction that the increase in the revenue of the institution indicates financial prosperity.

The books and registers were examined and found regularly and correctly kept.

ELGIN DISTRICT ASYLUM,
29th April 1895.

Appendix B.

There are 156 patients in the asylum, 70 men and 86 women. Besides these there is 1 man on the register who is at present absent on pass. There are 4 females private patients; all the rest are paupers.

The following changes have taken place since last visit :—

Commissioners' Entries.

Royal and District Asylum.

Elgin District Asylum.

PRIVATE AND PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	16	19	35
Discharged recovered,	4	11	15
Discharged unrecovered,	—	3	3
Dead,	5	6	11

One woman who was in the position of a private patient at the time of last visit has since become a pauper.

The deaths are registered as due to diseases of the brain in 5 cases, to disease of the heart in 1 case, and to diseases of the lungs in 5 cases. *Post-mortem* examinations were made in 6 cases.

The only changes in the staff have been the discharge of an attendant on account of ill health, and the engagement of one to supply her place.

There are no entries in the Register of Restraint and Seclusion; there has been no accident; and the cases of escape in which the patients have been absent overnight before being brought back are 3.

The patients were found during the visit in a very satisfactory condition. They appear to be kindly treated, and their medical and other requirements are well attended to. The evils from which they have suffered owing to the overcrowded state of the wards will shortly be removed, as the new buildings are now almost completed and will soon be ready for being occupied.

It has been long felt that the want of night attendance on the patients was a serious defect in the organisation of the asylum, and the disadvantages of this have become much more apparent as the number of the patients has increased. The appointment of a night attendant for each side of the house cannot now be properly delayed, as it will be impossible to carry on the supervision of the patients satisfactorily without such officials. The enlargement of the asylum buildings makes the necessity for this all the more urgent.

Attention is again called to the absence of any arrangements for heating the single rooms.

The books and registers were examined and were found regularly and correctly kept.

ELGIN DISTRICT ASYLUM,
21st August 1895.

There are 157 patients on the register of the asylum at this date. Of these 4 women are private patients, and 71 men and 82 women are paupers. They are all resident.

The following statement shows the changes in the population since the date of last visit :—

PRIVATE PATIENTS. PAUPER PATIENTS.

	M.	F.	M.	F.	TOTALS.
Admitted,	—	1	6	8	15
Discharged recovered,	—	—	2	2	4
Discharged unrecovered,	—	—	3	3	6
Dead,	—	1	1	3	5

The deaths are registered as due to brain softening in 1 case, to pneumonia in 1 case, to diarrhoea in 1 case, to consumption in 1 case, and to tuberculosis in 1 case.

The changes in the staff consist in the engagement of 5 attendants, the dismissal of 1, and the resignation of 3.

There is no entry in the Register of Restraint and Seclusion. No escapes or accidents are recorded.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Elgin District Asylum.

The patients were found clean in person and suitably and comfortably clothed. Their physical condition is satisfactory and indicative of a liberal dietary. A well cooked dinner was served during the visit in a very quiet and orderly manner.

Every section of the asylum was found scrupulously clean and in excellent order. Some of the lavatories and corridors have been repainted, and linoleum has been laid in several of the passages.

The new buildings are now ready for occupation, and they will give accommodation of a very satisfactory character for 40 females. The dayroom and dormitories have been suitably and comfortably furnished, and the sanitary arrangements of this addition appear efficient. The overcrowding of the female division which has for some years been an unsatisfactory feature in the condition of the asylum, will now be relieved.

It is recommended that the large (E) dayroom on the female side be converted into a dayroom dormitory for the sick and for those who require special care on account of bodily infirmities. At present the sick and infirm patients who are confined to bed are scattered in various dormitories upstairs, and are not under the constant supervision which their condition requires. It would be a great improvement to have these patients in a sickroom on the ground floor. The carrying out of this recommendation presents no difficulties.

It is understood with satisfaction that a night attendant has been engaged for the female division of the asylum. One ought also to be appointed for the male division. There are among the men, as well as among the women, patients who require attention during the night on account of serious illness, suicidal tendencies, helplessness, or degraded habits, and they cannot be properly cared for without a special night attendant.

The attention of the District Board is again called to the necessity of some arrangement for heating the single rooms, and it is hoped that this will be made before winter sets in.

The asylum is evidently managed in an energetic and conscientious manner. The patients were free from complaint, and they appear to be kindly and judiciously treated.

The books and registers were examined and were found regularly and correctly kept.

Fife and Kinross District Asylum.

FIFE AND KINROSS DISTRICT ASYLUM,
7th January 1895.

There are 439 patients in the asylum at this date. Of these 203 are men and 236 are women. These numbers when compared with the numbers resident on 26th June, the date of last visit, show a decrease of 3 men and 6 women. It is satisfactory to find even this small decrease in the numbers in view of the overcrowded state of the institution.

The following changes have taken place since last visit :—

PAUPER PATIENTS.			
	M.	F.	TOTALS.
Admitted,	21	28	49
Discharged recovered,	7	9	16
Discharged unrecovered,	6	14	20
Dead,	11	11	22

The deaths are registered as due to diseases of the brain in 7 cases, to diseases of the heart in 2 cases, to diseases of the lungs in 10 cases, and to kidney disease, multiple sarcoma, and senile decay, each in 1 case.

Post-mortem examinations were made in 18 cases.

The changes in the staff of attendants and servants during the same period are the resignation of 14, the dismissal of 2, and the engagement of 16.

The Register of Restraint and Seclusion contains 6 entries. They refer to the use of seclusion in the treatment of 4 patients. There has been no accident to any patient. There have been 2 cases of escape in which the patients were absent for one or more nights before being brought back.

Thirteen men and 10 women are at present confined in bed. No patient is in seclusion.

As far as the overcrowded state of the asylum will permit, the patients were found in a satisfactory condition. They are comfortably and suitably clothed and appear adequately nourished. An excellent dinner of broth, corned beef and potatoes, was served during the visit. There were few manifestations of excitement, and no complaint was made by any patient.

The new hospital building is not occupied yet, but it is expected to be ready for occupation in a few weeks. No effort should be spared to complete the building as soon as possible, the necessity for relieving the overcrowding being urgent.

The water supply still remains insufficient for the wants of the institution, and the insufficiency will be more severely felt when the new buildings come into use. The necessity for obtaining an additional supply is understood to be fully recognised by the District Board, and it is hoped that an adequate supply will be secured at an early date. The matter is too important to admit of delay.

Dr Turnbull continues to show great ability and care in the management of the asylum and the treatment of the patients; and the impression left by the visit is very favourable.

The books and registers of the asylum were examined and were found regularly and correctly kept.

FIFE AND KINROSS DISTRICT ASYLUM,
6th August 1895.

There are 197 men and 244 women on the register of the asylum at this date. They are all resident.

The following statement shows the changes in the population since the date of last visit :—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
Admitted,	26	34	60
Discharged recovered,	12	8	20
Discharged unrecovered,	6	9	15
Dead,	14	9	23

Of the 15 patients discharged unrecovered 5 were transferred to other asylums, 4 were boarded out in private dwellings and 6 were sent to the care of relatives. It will be seen from these figures that Dr Turnbull endeavours to combat the growth of the population by discharging those patients who are tranquil and docile and for whom asylum care and treatment is no longer necessary. This policy is advantageous both to the patients and to the ratepayers.

The deaths are registered as due to general paralysis in 7 cases, to other brain diseases in 5 cases, to acute pulmonary diseases in 3 cases, to consumption in 4 cases, to disease of the heart and blood vessels in 3 cases and to peritonitis in 1 case. A *post-mortem* examination was made in 20 out of the 23 cases.

The mortality has been high, and it is to be feared that the overcrowded condition of the asylum has contributed to this result. It is hoped that every effort will be made to get the new hospital block ready for occupation at the earliest possible moment. The building is completed, and all that remains to be done is the putting in of the cooking apparatus in the kitchen and the furnishing of the wards. There should therefore be no difficulty in having its accommodations made ready at once. Three dormitories and 11 single rooms are in use on the male side of the new hospital block but this does little to relieve the overcrowded condition of the dayrooms in the main asylum.

The Register of Restraint and Seclusion contains 12 entries referring to the use of restraint in the treatment of 2 patients and of seclusion in the treatment of 4 patients. There have been 4 accidents involving in each case the fracture of a bone. They were all due to falls and no blame was attached by Dr Turnbull to any one. Four escapes have occurred in which the patients were absent overnight before being brought back. Nine attendants have resigned, 2 have been dismissed and 13 have entered the service of the asylum.

Appendix B.
Commissioners' Entries.
Royal and District Asylums.
Fife and Kinross District Asylum.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Fife and Kinross District Asylum.

The patients were neatly and comfortably dressed, and their physical condition was indicative of a liberal dietary. There was a considerable amount of excitement among the patients, and it was felt that this was in a large degree due to the irritation caused by the overcrowding which exists. The dayrooms and dormitories were found clean and in good order but the number of plants and other articles of decoration might be increased with advantage. This would have a beneficial effect on the patients by giving a more homelike appearance to the wards.

The industrial employment of the patients receives due attention. Over 65 per cent of the patients are registered as being engaged in useful work. The desirability of obtaining more land for the asylum should be kept steadily in view. Healthy and useful outdoor work forms an essential element in the treatment of the male patients, and an adequate extent of land in connection with the asylum is therefore of the utmost importance.

The management of the institution is characterised by ability and conscientiousness. Dr Turnbull evidently devotes himself with zeal and energy to the welfare of the patients and to the administration of the asylum.

The books and registers were examined and were found regularly and correctly kept.

Glasgow Royal Asylum.

GLASGOW ROYAL ASYLUM,
1st and 2nd April 1895.

The number of certificated patients at present on the register of the asylum is 485. The following statement shows the number of private and pauper patients respectively :—

	M.	F.	TOTALS.
Private Patients,	174	193	367
Pauper Patients,	82	36	118
	256	229	485

These figures show that since last visit there has been an increase of 3 private patients and a decrease of 6 pauper patients. All the patients were resident and seen during the visit.

In addition to the patients included in the above statement there are 2 male and 9 female voluntary inmates who are not under certificates.

The following changes have taken place since 20th October 1894, the date of last visit :—

	PRIVATE.		PAUPER.		TOTALS.
	M.	F.	M.	F.	
Admitted,	31	22	—	—	53
Discharged recovered,	11	8	—	—	19
Discharged unrecovered,	9	8	2	2	21
Dead,	5	9	2	—	16

The mortality has been low and the deaths are registered as due in 4 cases to brain disease, in 3 cases to heart disease, in 3 cases to consumption, in 2 cases to bronchitis, and in 1 case each to pneumonia, cancer, Bright's disease, and senile decay. *Post-mortem* examinations were made in 7 cases.

There are 6 entries in the Register of Restraint and Seclusion. They refer to the use of seclusion for periods varying from 1 to 8 hours in the treatment of 3 patients. Two accidents are recorded, but they are not of a serious character. There has been no escape in which the patient was absent over night before being brought back. Five attendants and servants have been dismissed, 19 have resigned and 26 have been engaged.

All parts of the institution were found in excellent order, and its cleanness attracted special attention. The condition of the patients was most satisfactory, and the absence of excitement and of complaint was very noteworthy.

The case of each patient is carefully studied both bodily and mentally, and the progress and medical treatment of each case are recorded with fulness and ability.

Dr Yellowlees was absent on leave, but it was evident in every department that the administration of the asylum was very efficient and successful. The

institution deservedly enjoys the confidence of the medical profession and of the public. Appendix B.

The asylum continues to be of great public service in providing for persons of limited means who become insane and require institutional care, and those who are acquainted with lunacy administration are aware of the benefits which the asylum confers on this class of persons. Commissioners' Entries.

There are 52 patients in the asylum whose rates of board are £30 and under, the majority of whom are provided for in a manner exceeding in cost the rates of board which are charged. Royal and District Asylums.

If it were not for this charitable action of the asylum, the majority of these patients could only have obtained asylum treatment by application to the parochial authorities, and would thus have to be placed on the poor-roll and have the stigma of pauperism attached to them. An extension of this charitable and useful function of the asylum will soon be possible. Glasgow Royal Asylum.

There are 52 pauper lunatics in the asylum chargeable to the landward parishes of Lanarkshire, who will soon be removed to the new District Asylum at Hartwood. If the accommodation available, when these pauper patients are removed, can be devoted to private patients able to pay the lowest possible rates, a great benefit will be conferred on the poorer class of private patients, due provision for whom has always been and still is a great desideratum.

The books and registers were examined and were found regularly and correctly kept.

GLASGOW ROYAL ASYLUM,
2nd and 3rd September 1895.

There are 450 patients on the registers of the asylum. Of 441 who are under certificates, 176 male and 200 female patients are private patients, and 46 males and 19 females are paupers. Two male and 7 female patients are voluntary inmates. Three private patients, 2 male and 1 female, who are on the register are absent on pass.

Since last visit the following changes have taken place :—

	PRIVATE.		PAUPER.		TOTALS.
	M.	F.	M.	F.	
I. Certificated Patients—					
Admitted,	25	36	—	—	61
Discharged recovered,	8	13	—	1	22
Discharged unrecovered,	11	9	36	16	72
Dead,	3	5	1	2	11
II. Voluntary Inmates—					
Admitted,	1	3	—	—	4
Left,	1	5	—	—	6

In addition to the changes shewn in this statement 1 male and 2 female patients have been transferred from the private to the pauper list.

For some years the asylum has ceased to receive pauper patients directly from their parishes, and the number of this class of inmates has therefore been gradually diminishing. Recently the number has been subjected to a more than ordinary reduction owing to the removal to the District Asylum lately opened at Hartwood, of patients belonging to parishes in the Lanark Lunacy District. There has thus been a net reduction of the number of pauper patients by 53 since the date of last visit. With reference to the 6 voluntary inmates noted above as discharged, it is proper to state that 3 of them were, immediately after their discharge, placed under certificates, and they are included among the certificated patients represented as having been admitted.

The deaths are registered as due to brain diseases in 2 cases, to consumption in 2 cases, to exhaustion from mania in 3 cases, and to diabetes, Bright's disease, intestinal ulcer, and old age, each in 1 case. *Post-mortem* examinations were made in 4 cases.

Since last visit the following changes have occurred in the staff of attendants—20 attendants have resigned and 21 have entered the service.

The Register of Restraint and Seclusion contains 11 entries. They refer to the use of restraint in the treatment of 1 patient, and to the use of seclusion in the treatment of 4. The restraint used was gloves attached to a waist-

Appendix B. belt, and it was used to prevent a patient, who had already succeeded in destroying one of his eyes, from destroying the other.

Commissioners' Entries. The only serious accident that has occurred is a fracture of the radius in the case of a lady patient who fell while dancing.

Royal and District Asylums. One patient who escaped was absent over night before being brought back to the asylum.

Glasgow Royal Asylum. The asylum was found in admirable order throughout. It is well furnished ; new furniture is provided when required and repairs to the building are duly attended to. Two rooms have recently been refloored.

During the two days occupied by the inspection, every patient was, according to the invariable practice, seen and given an opportunity of speaking to the Commissioner. Everything that was observed tended to show that each case receives careful consideration from Dr Yellowlees and his assistants and that the patients are skilfully and kindly treated. It is noted with satisfaction that the staff of attendants includes 9 who are on duty during the night. It is of great importance in every asylum that this section of the staff should be adequate in number.

The valuable service which this asylum renders to the public in providing for private patients of limited means has often been referred to with commendation in these entries, and it is greatly to the credit of the directors that this, the charitable portion of their functions, is being extended in its operation more and more every year. In the year 1884 there were 93 patients resident whose rates of board were £40 *per annum* and under. The present number at these rates is 185, and many of them are kept at rates that are almost nominal. Patients belonging to this, the poorest class, of private patients can only be satisfactorily provided for in such institutions as the Royal Asylums ; and it is a great advantage to the public when the administrators of these institutions recognise their responsibilities in so liberal a manner as is done by the administrators of the Glasgow Royal Asylum. It is observed with pleasure that while the charitable action of the asylum has been extending, the confidence of the public in regard to the provision made in the asylums for patients at higher rates of board has not decreased but has rather increased during the period already referred to. In the year 1884 the number of patients at rates above £40 *per annum* was 180 ; and it is now 205.

The Medical records in the Case books are full and up to date. The other books and registers are regularly and correctly kept.

Haddington
District
Asylum.

HADDINGTON DISTRICT ASYLUM, 22nd April 1895.

There are 129 patients on the register of the asylum at this date. Six men and 8 women are private patients, and 54 men and 61 women are paupers. All are resident and were seen except 1 female private patient who is absent on pass.

The following changes have taken place since 24th December, the date of last visit :—

PAUPER PATIENTS.			
	M.	F.	TOTALS.
Admitted,	7	3	10
Discharged recovered,	2	—	2
Discharged unrecovered,	1	—	1
Dead,	4	1	5

The deaths are registered as due to fatty degeneration of the heart, gangrene, and syncope, each in 1 case, and to senile decay in 2 cases. One *post-mortem* examination was made.

One attendant has resigned and 1 has been dismissed ; 2 have been appointed to fill the vacancies.

The Register of Restraint and Seclusion contains 6 entries. They refer to the use of seclusion in the treatment of 2 patients when suffering from epileptic excitement. The Accident Register contains an entry referring to a fall sustained by a male patient 70 years of age, which resulted in fracture of the femur. There has been 1 case of escape in which the patient was absent over night before being brought back.

The patients in this asylum are very well provided for. They are well fed and comfortably kept. Dinner was served during the visit, and as usual was good in quality and abundant in quantity.

The wards were found clean, well aired, and comfortable.

Due attention is given to the industrial occupation of the patients. The men are chiefly employed in garden and farm work, and occasionally at the quarry. The women besides the work of the kitchen and laundry, do all the needlework and knitting required for clothing and furnishings, except the making and mending of the outer clothing of the men.

A room is very much required for the teasing of hair and the re-making of mattresses; and it would be a great advantage to have a cottage which could be used if required, for an infectious disease hospital. A small cottage hospital for such an emergency, as the occurrence of infectious disease could be utilised at ordinary times for mattress making and similar purposes. The consideration of the question as to the best way of providing the required accommodation, is recommended to the District Board.

The books and registers were examined, and were found regularly and correctly kept.

HADDINGTON DISTRICT ASYLUM, 7th October 1895.

There are 145 patients on the register of the asylum at this date. Of these, 7 men and 9 women are private patients, and 59 men and 70 women are paupers. One male patient is absent on probation, and 1 man and 1 woman are absent on pass, so that there are 142 patients resident. Since last visit, 1 private patient has become a pauper.

The following statement shows the changes which have taken place since the date of last visit:—

	PRIVATE.		PAUPER.		TOTALS.
	M.	F.	M.	F.	
Admitted,	1	3	9	13	26
Discharged recovered,	—	—	2	4	6
Discharged unrecovered,	—	1	1	—	2
Dead,	—	—	1	1	2

The deaths are registered as due in 1 case to pleurisy and in one case to broncho-pneumonia. One *post-mortem* examination was made.

The Register of Restraint and Seclusion contains 16 entries, referring to the use of seclusion in the treatment of 6 patients when subject to maniacal and violent excitement. The Register of Accidents contains no entry. There have been 4 escapes in which the patients were absent over night before being brought back. The changes among the staff consist in the resignation of 6 attendants, the dismissal of 2, and the engagement of 6.

The dayrooms and dormitories were found clean and in good order, and the appearance of the wards was bright and comfortable. A considerable number of the mattresses require re-teasing, and the number is so great that it is recommended that this should be done by contract, as it would take the patients too long to overtake the work.

The condition of the patients was most satisfactory, and it was evident that they are kindly and judiciously treated. There was a complete absence of excitement during the visit, and no reasonable complaints were made. The clothing of the patients was clean, tidy, and sufficient. An abundant and well cooked dinner of broth, beef, potatoes, and bread, was served during the visit in a most orderly manner. Forty-eight men and 66 women are regularly employed in occupations which are useful and interesting, and which conduce to their contentment and physical well-being.

There has been an increase of 16 patients in the population of the asylum since last visit, and there is at this date only 1 empty bed on the male side and 1 on the female side.

There are 16 private patients at present in the asylum, and their removal could be called for, but if this were done the probability is that the majority of these patients would have to be readmitted as paupers. Boarding out has been pressed on the parochial boards in the county, but it has been found impracticable to obtain any appreciable reduction in this way. It therefore

Appendix B.
Commissioners
Entries.
Royal and
District
Asylums.
Haddington
District
Asylum.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

seems inevitable that some addition to the accommodation should be made. The numbers have increased by 12 during the last five years—from 1st January 1890 to 1st January 1895—and there seems no reason to expect that the increase during the next five years will be less, in fact the increase from 1st January 1895 to this date is 18. An extension providing for 24 or 30 patients would therefore be necessary. The sickroom accommodation on both sides is inadequate for the number of infirm and helpless patients, and the addition to the accommodation should be an extension of these sections of the asylum.

The books and registers were examined, and were found regularly and correctly kept.

Inverness District Asylum.

INVERNESS DISTRICT ASYLUM,
26th and 27th April 1895.

There are 449 patients in the asylum at present, 229 men and 220 women. Besides these, there are on the register, 10 men and 14 women who are absent on probation, and 1 man who is absent by escape.

The following changes have taken place since last visit :—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	26	26	52
Discharged recovered,	9	11	20
Discharged unrecovered,	7	2	9
Dead,	5	10	15

Of the patients discharged unrecovered 4 were sent to their relatives, 3 were placed under the care of unrelated persons, 1 was transferred to another asylum, and 1 escaped and has not been brought back.

The deaths are registered as due to diseases of the brain in 4 cases, to phthisis in 5 cases, to other pulmonary diseases in 4 cases, to melancholic exhaustion in 1 case, and to intestinal obstruction in 1 case. The patient who died of intestinal obstruction was absent from the asylum on probation at the time of death. *Post-mortem* examinations were made in 12 cases.

The changes in the staff of attendants and servants consist of the resignation of 20, the dismissal of 8, and the engagement of 29.

The Register of Restraint and Seclusion contains 79 entries. They refer to the use of restraint in the treatment of 3 patients, and to the use of seclusion in the treatment of 10. Of the patients who made their escape 9 were absent over night before being brought back. There has been no accident of a serious character.

The impression produced by the visit is very satisfactory. There is evidence of earnest efforts to provide for the patients, and to treat them in the ways most likely to promote their recovery, and, in the case of those whose recovery cannot be expected, to improve their mental condition and induce contentment. Considerable success has already attended these efforts and there seems reason to hope that further success may be looked for in the future. Marked improvements were observed in the cleanliness of the persons and the clothing of the patients. That the comfort and well-being of the patients generally is receiving increased attention is shown by the noticeable absence of irritability among them. It was ascertained that during the late severe winter everything was done which the resources of the institution permitted to keep the apartments comfortably warm.

The wards were found everywhere in excellent order, well aired, and admirably clean. The arrangements for heating are not so efficient as they ought to be; but it seems probable that this defect would be overcome by the introduction of a better class of grate or stove into the rooms and corridors to replace the present grates, which are neither economical nor efficient.

The inadequacy of the hospital accommodation was as usual very apparent; and it is therefore with pleasure that it is understood that plans for remedying this and some other defects have been prepared, and will be submitted to the General Board at an early date.

It is stated that the ground used as an asylum cemetery is now fully occupied. In these circumstances an opportunity is afforded for making a change in the arrangements for burial. There are obvious objections to the

existence of an asylum cemetery. It seems unnecessary and undesirable to continue after death the separation of asylum inmates from the rest of mankind which is unavoidable during life. It is strongly recommended, therefore, that arrangements should be made for interment in future in an ordinary burying ground.

It is hoped that steps will be taken as soon as possible to divert into a different route the public road which passes close to the asylum.

The books and registers were examined and were found regularly and correctly kept.

Appendix B.
Commissioners' Entries.
Royal and District Asylums.
Inverness District Asylum.

INVERNESS DISTRICT ASYLUM,
20th August 1895.

There are 472 patients on the register of the asylum at this date. Of these 1 male is a private patient, and 245 men and 226 women are paupers. Four men and 24 women are absent on statutory probation, so that there are 454 patients at present resident in the asylum.

The following statement shows the changes in the population since the date of last visit :—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	25	23	48
Discharged recovered,	10	23	33
Discharged unrecovered,	6	2	8
Dead,	3	6	9

The deaths are registered as due to heart disease in 1 case, to pneumonia in 1 case, to pleurisy in 3 cases, and to consumption in 4 cases. A *post-mortem* examination was made in each case, and the results of these examinations are carefully recorded.

Dr Keay continues by a judicious selection of patients for care in private dwellings to control the growth of the asylum population. Since last visit 6 patients, who no longer appeared to require asylum care and treatment, were discharged unrecovered and placed under the care of either relations or unrelated persons. There are at this date 14 patients out on statutory probation with a view to test their fitness for care in private dwellings.

The changes in the staff consist in the resignation of 5 attendants, the dismissal of 1 and the engagement of 11. The staff has been increased by 5 attendants in order to secure more efficient care and supervision of the patients.

The Register of Restraint and Seclusion contains 32 entries referring to the use of restraint in the treatment of 2 patients, and the use of seclusion in the treatment of 5 patients. There have been 13 escapes in which the patients have been absent at least one night before being brought back. Five accidents are recorded, 2 of which involved the fracture of a bone and were due to falls. The other three accidents were not of a serious character.

The condition of the patients was very satisfactory. A marked improvement was observed in their clothing—it was neat and tidy in appearance and of good quality. The patients were clean in person, and their physical health and condition were satisfactory. A well cooked dinner was served in the dining-hall to 419 patients during the visit, and the behaviour of the patients during the meal was quiet and orderly. There were very few manifestations of excitement throughout the asylum, and no reasonable complaints were made. The condition of each patient is carefully studied and recorded with fulness and ability.

The industrial occupation of the patients receives every attention. There are 189 men and 135 women registered as being industrially employed.

The dayrooms and dormitories were found scrupulously clean and in good order. Several improvements were observed in the furnishing and decoration of the wards, all of which contribute to give them a more cheerful, comfortable and homelike appearance. The painting and sizing of sections of the asylum are in progress. A new scullery has been built at the east end of the dining-hall, the cesspools under the kitchen have been removed, and the kitchen has been improved and rendered more efficient by new dressers and by new

Appendix B. copper piping, which is now everywhere exposed. A curling pond is in process of being made.

Commissioners' Entries. The general administration of the asylum is characterised by energy and ability, and in every department there was evidence that Dr Keay spares no effort to provide for the patients in a thoroughly satisfactory manner.

Royal and District Asylums. It is understood that plans have been prepared for extended hospital accommodation and for new bath-rooms and shoe-rooms, and that they are to be submitted to the General Board at an early date. All these improvements are necessary to make the asylum efficient and in accordance with modern requirements. The present sick-rooms, bath-rooms and shoe-rooms have for many years been inadequate for the increased population of the asylum.

The books and registers were examined, and were found regularly and correctly kept.

Kirklands Asylum, Bothwell.

KIRKLANDS ASYLUM BOTWELL,
18th March 1895.

There are 136 men and 96 women at present on the register of this asylum. Of this number there are 32 men and 5 women resident at the branch establishment at Hartwood.

The changes since the date of last visit, 26th May 1894, are as follows:—

PAUPER PATIENTS.			
	M.	F.	TOTALS.
Admitted,	32	15	47
Discharged recovered,	12	7	19
Discharged unrecovered,	6	3	9
Dead,	12	5	17

The deaths are registered as due in 7 cases to brain disease, in 3 cases to pneumonia and bronchitis, in 2 cases to consumption, in 3 cases to heart disease, and in 1 case each to peritonitis and puerperal fever. *Post-mortem* examinations were made in 10 cases and the results are fully and carefully recorded.

There are 10 entries in the Register of Restraint and Seclusion referring to the use of seclusion in the treatment of 3 patients, and to the restraint of 1 patient for the purpose of preventing interference with surgical dressings. There has been no escape. One accident is recorded, a scalp wound caused by a fall due to a syncope attack which ended fatally. There have been 7 changes among the attendants since the date of last visit. The staff of attendants in this establishment appears to be very satisfactory. They have been well taught and trained by Dr Clark. The average length of service of the 13 male attendants is $4\frac{1}{2}$ years, and of the 9 female attendants $2\frac{3}{4}$ years. In addition to liberal increments to the wages, a bonus of a £1 is given for every complete year of service until it reaches the maximum of £5. The effect of this bonus has been to lengthen the period of service.

Dr Sken who was formerly Senior Assistant Medical Officer of the Stirling District Asylum is now the Medical Superintendent of this institution.

The wards were found in excellent order, scrupulously clean and comfortably heated. The condition of the patients was very satisfactory; and the condition, quality, and neatness of their clothing deserve commendation. The dinner which consisted of broth, beef and potatoes, was well cooked and was served in a most orderly manner. The men and women sit together at every table, and their quiet behaviour attracted favourable notice. The industrial occupation of the patients receives due attention but the small quantity of land in the possession of the institution renders it impossible to employ a large number of the male patients in healthy and active outdoor work.

The Lanarkshire District Asylum at Hartwood is to be opened on the 15th May. There are on the register of this asylum 116 patients chargeable to the landward parishes of Lanarkshire who will be transferred to Hartwood at the date of opening.

The books and registers were examined and were found regularly and correctly kept.

KIRKLANDS ASYLUM, BOTHWELL,
15th August 1895.

Appendix B.

There are 197 patients at present on the register of the asylum, 104 men and 93 women. They are all resident and were seen during the visit to-day. Since last visit the following changes have taken place:—

PAUPER PATIENTS.			
	M.	F.	TOTALS.
Admitted,	13	8	21
Discharged recovered,	9	3	12
Discharged unrecovered,	32	7	39
Dead,	4	1	5

Commissioners' Entries.

Royal and District Asylums.

Kirklands Asylum, Bothwell.

The deaths are registered as due to cerebral hæmorrhage, to heart disease, and to gastritis, each in 1 case, and to pneumonia in 2 cases. *Post-mortem* examinations were made in 3 cases.

On the opening of the new Lanark District Asylum at Hartwood the buildings at Liquo within the Hartwood grounds which had for some years been managed as a branch of this asylum ceased to be connected with it, these buildings having been taken over by the Lanark District Board. The accommodation at the disposal of the Kirklands Committee has thus been reduced by 37 beds, which was the number at Liquo. In consequence of this, 37 patients have been transferred from the books of the Kirklands Asylum to those of the Hartwood Asylum and they are included in the 39 mentioned above as having been discharged unrecovered.

The changes in the staff since last visit have been more numerous than usual. Thirteen attendants have resigned, 9 having obtained situations in the new Lanark Asylum, and 3 females having left to get married. One attendant has been dismissed. Thirteen have entered the service of the asylum.

The Register of Restraint and Seclusion contains 2 entries. They refer to the seclusion of 2 patients for periods of a few hours each. There has been no accident and no escape.

The asylum was found in a satisfactory condition. The wards were in excellent order, clean, well aired and comfortable.

The patients were tranquil; there were no complaints by any of them; and their requirements are well provided for.

The inspection produced a very favourable impression as regards the management of the institution.

The books and registers were examined, and they were found regularly and correctly kept.

LANARK DISTRICT ASYLUM, HARTWOOD,
21st and 23rd November 1895.

Lanark District Asylum, Hartwood.

This asylum was, after its completion, inspected on 7th May of the present year, and having been duly approved and adopted by the General Board as a District Asylum, it was opened for the reception of patients on the 14th May.

There are now on the register of the asylum 210 men and 164 women, being 374 patients in all.

The following admissions, discharges, and deaths have taken place since the opening.

PAUPER PATIENTS.			
	M.	F.	TOTALS.
Admitted,	233	170	403
Discharged recovered,	8	5	13
Discharged unrecovered,	6	1	7
Dead,	9	0	9

The deaths were due in 5 cases to diseases of the nervous centres, in 1 case to heart disease, and in 3 cases to diseases of abdominal viscera. *Post-mortem* examinations were made in 8 cases.

Appendix B.

Commissioners' Entries. The Register of Restraint and Seclusion contains 13 entries. They refer to the use of the padded room in the treatment of 6 patients. There has been no accident to any patient, and no patient has escaped.

Royal and District Asylums.

Lanark District Asylum, Hartwood.

The buildings of which the institution consists are intended to serve as asylum accommodation for the pauper lunatics of the Lanark Lunacy District, which comprises all the parishes of the county of Lanark, except the parishes of City of Glasgow, Barony, and Govan. They are constructed to contain 500 patients, the central block and administration departments being sufficient to serve for an additional 200 patients.

On 1st January 1890, the year in which the erection of the asylum was begun, the number of pauper lunatics belonging to the District who were in asylums was 332. During the five years since that date the number increased by 101, so that the number on 1st January of the present year was 433. A considerable addition to this number will probably be made during the ensuing year owing to the opening of the asylum. The number having been kept down during recent years by the difficulty of finding asylum accommodation, the removal of that difficulty will probably be followed by an unusual rapid rise in the number. It will therefore be a very short time before the number will reach 500, which is the limit of accommodation now provided. This would be a matter of immediate urgency if it were not that the District Board still possesses accommodation in the Kirklands Asylum: there can be little doubt that it will be necessary to build the additions designed to bring the accommodation up to at least 600 beds before the accommodation at Kirklands can be vacated.

The buildings at Hartwood are, as is fitting for such an institution, of plain but substantial character. They stand on an elevated site sloping towards the south, and their main front faces in that direction. They consist of several blocks. The centre block contains the dining-hall and amusement room in front, with the kitchen and general store behind. On the east is the accommodation for males, and on the west the accommodation for females. On each side next the central section are the houses for the officials and servants, the Medical Superintendent's office being in the east block or male house, and the matron's room in the west block or female house. Further from the centre on each side are the wards for the senile and infirm patients, and attached to them, but still further from the centre, are the hospital wards. Behind the senile and infirm section are blocks containing the admission and special observation wards, and still further back towards the north are the blocks for the chronic patients and the class requiring least supervision. The hospital wards are of one storey, the senile and infirm, and the special observation wards are of two storeys, and the chronic blocks, which are simpler in their arrangements than the rest, are of three storeys. Towards the centre and to the north are, on the male side the workshops, and on the female side the laundry and engine-house. Each set of wards is connected with the central block, and with the official blocks, by corridors of communication. The Medical Superintendent's house is, according to Scottish custom, quite separate from the rest of the institution.

The positions of the several sections of the asylum and the details of the plan of construction were fixed by the District Board under the advice of Dr Campbell Clark, the Medical Superintendent, and Mr Murray, the Architect: and the District Board, and especially their Chairman, Sir Wyndham Carmichael Anstruther, who has unsparingly devoted time and energy to the work, are to be congratulated on the success that has attended their efforts. The asylum as a whole is admirably suited for its purpose, and every detail in its arrangements gives evidence of having received careful and enlightened consideration. A full description of the asylum cannot be given here: but it may be useful to put some of its salient features on record in this report of the first official inspection since it was opened for the admission of patients.

The asylum possesses the advantages which are derived from its division into separate blocks. Every section is well lighted during the day: they are all easily ventilated, and the risks from fire are minimised. The complete separation of the several groups of wards has also important administrative advantages in making the responsibilities of the charge attendants well defined and easily understood.

A very useful feature in the structural arrangements is the system of sub-

ways formed under the corridors of communication. In these the sectional boilers, the pipes carrying steam or water, and the electric wires are placed, and thus everything connected with their regulation and repair can be attended to without any disturbance of the wards and without any breaking up of wood-work or plaster. The heating of the wards is, in addition to open fires in the day-rooms, by water conveyed from steam-heated boilers, each block of building having its own boiler. The electric light is used for illuminating purposes in all parts of the asylum, and there is telephonic communication throughout.

The providing of special blocks for male and female officials respectively constitutes an unusual arrangement. It possesses certain advantages, and it is strongly advocated by Dr Clark, at whose suggestion it has been adopted. The male house contains the Board Room, the Superintendent's and Clerk's offices, Medical Assistants' quarters, male visiting room, and the sleeping accommodation for some of the male unmarried officials and servants. The female house contains the matron's rooms, the female visiting rooms, day-rooms for the nurses, and sleeping accommodation for all the female officials and servants. It was observed with approval that the accommodation that is provided for attendants and nurses in these houses is excellent. It does much to render the position of these officials desirable if due provision is made for their comfort during the time they are off duty, and the District Board have done wisely in recognising this in a liberal manner. Acting in the same wise and kindly spirit, twenty-five cottages have been erected on the estate for the accommodation of married employes and their families. In regard to the special blocks for male and female officials, Dr Clark, who lived in the male block for six months before his own house was ready, says that he had during that time a sense of something distinctly different from anything he had previously known in asylum life. Those living in these blocks feel away from ordinary asylum influences. The blocks are entirely independent of each other: they are nurses' homes isolated in the administrative centre, and not inconveniently isolated as nurses' homes usually are. He never knew, he says, the female side of an asylum with so much privacy for the nurses before, or with facilities so great for raising their self-respect.

The interior finishings of the different sections of the asylum have been well done. The floors and the wall linings, where tiles have not been used, are of pitch pine: the plaster work has been finished throughout with Keen's cement on a foundation of Portland cement. Tiles have with great advantage been freely used for the walls and floors of lavatories and water-closets, in the kitchen and sculleries, and elsewhere, and the plumber work and smaller fittings are all excellent of their kind.

It has become unnecessary to say in regard to any recently-erected Scottish asylum that there are no airing courts attached to the wards. The evils to which airing courts often give rise, and the beneficial effect of their absence, is now fully recognised. There are no airing courts attached to this asylum, and in the opinion of Dr Clark it would be a disadvantage to have them.

The selection of the articles of furniture for the wards has been admirably done. In the endeavour to provide what will be really useful in the treatment of the patients, neither thought nor expense has been spared, but neither is there any evidence of objectless extravagance. The way in which a room is furnished exercises a great influence on the conduct of the patients, and this has been recognised, for example, in the providing of small tables in the dayrooms and elsewhere, round which small groups of patients naturally form themselves. The needs of particular classes of patients have been kept well in view, as, for example, in the providing of comfortable chairs of special design for patients suffering from various kinds of helplessness. An example of thoughtful consideration is also afforded by the furnishing of the windows of the sleeping apartments, both of patients and officials, with obscure as well as light blinds, so that the rooms may be darkened and sleep encouraged when the beds are occupied. Other illustrations of a similar kind could be given: but it is sufficient to say that everything that was seen bore evidence that pains had been taken to furnish the asylum in the way best fitted to secure the efficient treatment of the patients. One recommendation may, however, be given, which is that a greenhouse should be erected. It would be a valuable, though not an expensive addition to the resources of the asylum.

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Lanark District Asylum, Hartwood.

Appendix B.

The present staff of the asylum, including the Medical Superintendent and two medical assistants, consists of 70 persons. It may be classified as follows :—

Commissioners' Entries.	M.	F.	TOTALS.
Royal and District Asylums.	Medical, 3	—	3
	Administrative, 5	1	6
	Attendants and Nurses, 25	17	42
	Servants, 4	8	12
Lanark District Asylum, Hartwood.	Artizans, 7	—	7
	Totals, 44	26	70

For the number of patients at present in the asylum this amounts to 1 in every 5 patients, and, if all the beds were occupied, to 1 in every 7 patients. The proportion of attendants and nurses is at present 1 to every 9 patients, and, if all the beds were occupied, to 1 in every 12 patients. The number of attendants and nurses engaged in night duty is larger than usual, there being 5 on the male side and 4 on the female side. But this is to be commended, as the staff of night attendants in Scottish asylums is in most cases smaller than is desirable. The efficient treatment of a large number of the patients requires careful night supervision, and evidence was obtained during the present visit that several patients had received considerable benefit since their admission to the asylum from the attention given to their needs during the night.

The arrangements for dealing with a patient on being admitted to the asylum are worthy of notice. There are attached to the sections for recent and acute cases small bedrooms, called admission rooms, having bathrooms opening into them, one such near the male entrance to the asylum, and the other near the female entrance. On arriving at the asylum a patient is taken to the admission room to be seen by a medical officer, after which, if the medical officer sees no reason to the contrary, the patient is bathed under the supervision of the head attendant, and then put to rest in the bed which, at this season of the year, has been previously made comfortably warm by a hot water bottle. The patient is then more systematically examined by the medical officer, who gives instructions as to further treatment. In this way a patient becomes acquainted with the medical officer and with some of the most experienced and most trusted of the attendants or nurses, before seeing anything of the ordinary asylum wards, and it may be expected that a favourable impression will thus be made on the patient's mind, which will tend to produce contentment and promote recovery.

The patients were seen at dinner on both of the days occupied by the visit. The food was good, well cooked, and sufficient in quantity. It was served in an orderly and remarkably rapid manner, so that the patients had it before it had time to cool. Some details attracted special notice. The tables are of moderate size, so that the patients are divided into groups of 8 or 9. At most of the tables there are both men and women. At some of them an elderly female patient presides, who is entrusted with the helping of the food. These tables are known as family tables, and the patients who sit at them are selected from among the most orderly and intelligent of the inmates. Each patient has a knife, fork, spoon, glass tumbler, plates for soup, meat, and pudding, and a small plate for the potato peelings, the potatoes being served in their skins. At tea time the same women preside at their respective tables and help the tea from their own teapots. These arrangements are very pleasing in their effect, giving as they do a feeling of homelike sociability to the meals; and Dr Clark states that not only do the patients like them, but they have a refining effect on the patients' behaviour. The family tables are mentioned here as worthy of special approval: but there was great orderliness and seemliness at all the tables. The plates, tureens, and dishes are of the most appropriate kind, being as far as possible such as would be used in the houses of working people of the better class. Table mats are used to prevent soiling of the table cloths, and cleanliness and tidiness are encouraged in every way.

The general appearance of the patients when seen in the wards was very satisfactory. The clothing both of men and women was comfortable, suitable,

and admirably clean. It was observed with pleasure that a successful effort is made to give even the most slovenly and demented patients an appearance of smartness by making the clothing tasteful, well fitting, and adapted to the peculiarities of individual cases. There was great tranquility and very little evidence of irritability : and this satisfactory condition may fairly be regarded as to some extent due to such things as the numerous small tables with which the wards are furnished, the variety of comfortable seats, the pianos and bagatelle tables, the abundant supply of illustrated and other books, and the liberal supply of draught boards, and similar inducements to healthy mental occupation.

Appendix B
Commissioners' Entries.
Royal and District Asylums.
Lanark District Asylum, Hartwood.

The District Board have done well in having acquired a considerable extent of land. The asylum estate has an area of 601 acres, the upper part towards the north being chiefly moorland, and the lower part towards the south being arable. The arable portion will be of great use in providing beneficial and remunerative work for the male patients ; and the possession of the moorland has given the means of providing the institution with an abundant supply of water.

For the water-supply two reservoirs have been constructed, one to provide water for dietetic purposes, capable of storing over 8,000,000 gallons ; and the other to provide water for flushing and fire-extinguishing purposes, capable of storing over 5,000,000 gallons, the first being 50 feet above the floor level of the asylum, and the second being 120 feet above the floor level. The dietetic reservoir, when full, will contain a supply equal to 76 gallons daily per head to a population of 600 inmates for a period of 180 days : and this seems adequate for all prospective requirements.

The Caledonian Railway crosses the lower part of the estate. It has a station at the eastern boundary, and a branch line has been made to the asylum store, so that the institution is well provided with means of communication both for persons and goods.

An iron railing 7 feet high has been erected on the asylum side of the railway. It is continued along the western boundary of the estate as far as the lower reservoir, and passes round both that and the higher reservoir. This was necessary to prevent accidents to patients with suicidal tendencies.

The disposal of the sewage of the asylum is by irrigation. The drains discharge into filtering tanks to the south of the railway line, and from there the sewage is distributed over the lower fields.

The industrial occupation of the patients, which is one of the most important means of allaying excitement and irritability, and of generally promoting health of body and mind, receives due attention. The women obtain the more active kind of work in the kitchen and laundry, and in the household work of the wards. The less active work consists, as is usual, of sewing and knitting. The sewing and knitting are in some asylums chiefly done in a special workroom, and in others they are distributed through the ordinary dayrooms. The latter is the way adopted here, and it is thought by the present writer to be the better way. Among other advantages, it gives to the dayrooms a more cheerful appearance than they would otherwise have ; and here one of the uses of the small tables makes itself felt by the way in which they lead to the formation of pleasant-looking busy groups.

Work is found for some of the men as artisans, as tailors, shoemakers, joiners, and bakers : but the chief occupation is outdoor labour. The best way of indicating the nature of this is to give a statement of some of the work done during the present year, chiefly since the opening of the asylum, though it includes some work done by a group of 30 patients, who were located in buildings on the asylum grounds previous to the opening. They have carried on kitchen garden work all the summer, have kept the asylum well supplied with vegetables, and have provided a large crop of carrots, turnips, cabbages, and potatoes for winter use. Besides this, about 12 acres of garden ground have been drained, and more than half of this has been trenched. A laundry green has been cut out of the hill side, a curling pond for four rinks has been made, and the ground about the buildings has been cleared of the rubbish left by the builders, and laid out in an orderly manner. The mere enumeration of these details is sufficient to show that the men have been fully occupied with work, and it appears from the Daily Register of the asylum that at present the outdoor work gives employment to 108 men, which is more than one half of the total number of male inmates.

Appendix B.

Commissioners' Entries.

Royal and District Asylum.

Lanark District Asylum, Hartwood.

The importance of abundance of outdoor labour in the treatment of the male patients cannot easily be over-estimated, and in a new asylum there is usually no difficulty in finding plenty of such labour. It is on the farm, however, that reliance must be had for the greater part of the outdoor labour of the future, and it will be found that this institution will derive great advantage from the possession of a farm which is large enough to furnish plenty of such work. It is also satisfactory that the land is suited to provide work of varied character so as to meet the aptitudes of different classes of patients. The benefits which a farm confers on an asylum need not be dwelt on as they are so generally recognised, but one benefit may be mentioned which does not always receive due consideration. This is the way in which the existence of the farm may be made to colour the life of the whole population of the institution by giving to every one, whether engaged in farm work or not, subjects of healthy interest, and by making the daily routine resemble more that of an industrial community and less that of a house of detention. The District Board will no doubt keep such considerations in view when considering the plans of the farm steading, which, it is understood, will soon be before them. The steading should be, like the buildings already erected, good and adequate for its purpose, but should be plain and free from extravagance of any kind.

The Books and Registers of the asylum were examined. The Registers were found admirably kept, and the medical case books and pathological records which are kept by the assistant medical officers deserve to be mentioned with commendation.

Midlothian and Peebles District Asylum.

MIDLOTHIAN AND PEEBLES DISTRICT ASYLUM,
17th April 1895.

There are 223 patients in the asylum at this date. Sixteen men and 20 women are private patients and 93 men and 94 women are paupers. Besides those who are resident, there are on the register 1 male and 2 female private patients, and 7 male and 5 female pauper patients who are absent on probation, and 1 female pauper patient who is absent on pass.

Since 27th July, the date of last visit, the following changes have taken place:—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		
	M.	F.	M.	F.	TOTALS.
Admitted,	3	3	19	18	43
Discharged recovered, .	—	3	6	5	14
Discharged unrecovered,	2	1	5	4	12
Dead,	1	2	11	5	19

During the period to which these numbers refer 1 female patient was transferred from the pauper to the private list.

The deaths are registered as due to brain disease in 8 cases, to heart disease in 2 cases, to lung disease in 5 cases, to abdominal disease in 2 cases, to mammary tumour in 1 case, and to senile decay in 1 case. *Post-mortem* examinations were made in 16 cases.

The changes in the staff of attendants and servants consist of the engagement of 5 to fill the vacancies due to 5 resignations.

The Register of Restraint and Seclusion contains 10 entries. They refer to the use of restraint in the treatment of 2 cases, and to the use of seclusion in the treatment of 7 cases. Three patients who escaped were not brought back the same day. No serious accident has occurred.

The patients were found during the visit in a satisfactory condition. They were clean in person and suitably clothed. They are well nourished, and there were no indications of discontentment with the way in which they are provided for.

The industrial occupation of the patients receives due attention. In addition to many who assist in ordinary household work, 32 men are engaged in garden or farm work, 9 are employed as artizans, 1 as a stoker, and 2 as messengers, 4 women work in the kitchen, 12 in the laundry, 12 at sewing and 16 at knitting. During the winter the severe cold weather interfered greatly with outdoor work, but outdoor exercise was not neglected. About 30 of the male

patients and 6 attendants and servants were for some time engaged during a portion of almost every day in the game of curling. Few of them it is understood had any previous knowledge of the game, and a good many are said to have become very proficient.

The dayrooms and dormitories were found in excellent order. They looked comfortable, clean, and fresh. Many of them have been recently repainted and redecorated, this work having been done almost entirely by patients.

The water supply of the asylum is understood to be now in an efficient state. It is understood with approval that the District Board have in contemplation the appointment of an Assistant Medical Officer. The administration of an asylum with only one Medical Officer is always conducted under some difficulty, and the appointment of an Assistant to Dr Mitchell would be attended with important administrative and other advantages.

The books and registers were examined, and were found regularly and correctly kept.

MIDLOTHIAN AND PEEBLES DISTRICT ASYLUM,
30th July 1895.

There are 241 patients on the register of the asylum at this date. Eighteen men and 23 women are private patients, and 93 men 107 women are paupers. One male patient and 9 female patients are absent on probation, so that the number of patients resident is 231. Since last visit 1 private male patient and 1 private female patient have become paupers.

The following statement shows the changes which have taken place in the population since the date of last visit :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Admitted,	3	2	9	12	26
Discharged recovered, . .	1	—	7	3	11
Discharged unrecovered, .	—	—	9	2	11
Dead,	—	—	1	1	2

The deaths are registered as due to peritonitis in 1 case, and to empyema in 1 case. *Post-mortem* examinations were made in each case, and the results are recorded with care, fulness, and ability.

Praiseworthy efforts are made by Dr Mitchell to control the growth of the asylum population by discharging those patients for whom asylum care and treatment appear to be no longer necessary. This is a policy in administration which is advantageous to the patients and to the ratepayers. Since the date of last visit 7 patients have been placed in private dwellings under the care of strangers, and 5 have been sent to the care of relatives.

The Register of Restraint and Seclusion contains 6 entries referring to the use of seclusion in the treatment of 3 patients for periods varying from 3 to 6 hours. No accident is recorded. There have been 2 escapes in which the patients were absent for a night before being brought back. Three attendants have resigned and 5 have been engaged, but 2 of these are only temporarily engaged.

The wards were found scrupulously clean, well ventilated, and in excellent order. Progress continues to be made in the painting and decoration of the dayrooms and dormitories, and the work is being well and tastefully done. The establishment has in every department a bright and cheerful appearance.

The condition of the patients was very satisfactory. Their physical health was good, and they were free from excitement and complaint. Their clothing was neat and tidy and of good quality. Sixty-seven per cent. of the patients are industrially employed, a fact which is recorded with satisfaction, as nothing tends more to promote recovery, improvement, and contentment among asylum patients than healthy, interesting, and useful work. The case-books were found written up to date, and it was evident that the history and condition of every patient were carefully studied, and that the medical treatment is carried out with skill and ability.

The impression left by the visit was that the institution is under painstaking and conscientious management, and that Dr Mitchell's energies are devoted to the welfare of the patients and of the institution.

The books and registers were examined, and were found regularly and correctly kept.

Appendix B.

MONTROSE ROYAL ASYLUM,
9th and 10th May 1895.

Commissioners' Entries.

Royal and District Asylums.

Montrose Royal Asylum.

There are 594 patients in the asylum at present.

Thirty-eight males and 53 females are private patients, and 220 males and 283 females are paupers. All are under certificates except 1 lady who is a voluntary inmate. Besides the patients resident in the asylum, there are on the register 1 male and 1 female patients who are absent on probation, and 1 male pauper who is absent by escape.

The following changes have taken place since 12th July, the date to which the numbers in the preceding entry refer:—

PRIVATE PATIENTS. PAUPER PATIENTS.

	M.	F.	M.	F.	TOTALS.
Admitted,	10	11	34	37	92
Discharged recovered,	4	1	18	19	42
Discharged unrecovered,	1	1	6	4	12
Dead,	3	2	19	12	36

During the period to which these numbers refer, 1 female has been transferred from the private to the pauper list, and 2 females have been transferred from the pauper to the private list.

Of the 10 pauper patients discharged unrecovered, 4 were sent home to their relatives, 3 were placed with unrelated guardians, 2 were transferred to Kincardine Poorhouse, and 1 was transferred to the Stirling District Asylum.

The deaths are registered as due to diseases of the brain in 11 cases, to diseases of the heart and large vessels in 5 cases, to pulmonary diseases in 9 cases, to cancer in 3 cases, to intestinal obstruction in 1 case, to exhaustion from melancholia in 2 cases, and to senile decay in 5 cases.

The average age at death was 58 years. *Post-mortem* examinations were made in 31 cases.

The changes in the staff of attendants have been the resignation of 4, the dismissal of 2, and the engagement of 5.

The Register of Restraint and Seclusion contains 26 entries. They refer to the use of the camisole in the treatment of 7 patients, in 3 of these cases for surgical reasons.

In 3 cases of escape the patients were not brought back on the day that they escaped. There has been no accident to any patient.

It is satisfactory to find that there has been only a slight increase in the number of patients during the past year, as the asylum has been undesirably overcrowded for some time, especially in the pauper sections of the main building. It is observed with satisfaction, that the evils of overcrowding are to a large extent diminished by careful attention to ventilation, and by the large amount of time that the patients are made to spend in the open air.

The introduction of electric lighting has also been of great advantage, by preventing the vitiation of the air in the buildings which results from the use of gas.

In view of the overcrowding, it is desirable, however, that the proposed new buildings for which preparations are being made, should be erected as soon as possible, and it is understood with approval, that their erection is to be commenced immediately.

The various sections of the asylum were found in excellent order, and as is frequently observed in this institution, several improvements, some of them of a novel kind, have recently been made in the sanitary and mechanical arrangements.

The patients were found during the visit well provided for, and they are treated with great kindness and consideration.

The management of the asylum, both general and medical, continues to be highly satisfactory.

The books and registers were examined, and were found regularly and correctly kept.

MONTROSE ROYAL ASYLUM,
12th and 13th December 1895.

There are 597 patients on the register of the asylum at this date. Of these 39 males and 51 females are private patients, and 230 males and 278 females

are paupers. There are 2 males absent on statutory probation. The number of patients resident is therefore 595. Appendix B.

The following changes have taken place in the population of the asylum since the date of last visit :— Commissioners' Entries.

		PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.	Royal and District Asylums.
		M.	F.	M.	F.		
Admitted,		3	6	46	19	74	Montrose
Discharged recovered,		—	2	12	12	26	Royal
Discharged unrecovered,		2	4	9	5	20	Asylum.
Dead,		2	2	16	7	27	

The changes among the voluntary inmates are as follows :—2 have been admitted and 1 has left. There are at present 2 voluntary inmates resident in the institution.

Of the 27 deaths, 13 are registered as due to brain disease, 7 as due to phthisis pulmonalis, 4 as due to senile decay, 1 as due to heart disease, 1 as due to acute tuberculosis, and 1 as due to cut throat. In the case of 20 of the 27 patients who died, a *post-mortem* examination was made, and the results of these examinations are recorded with fulness and care, and are tabulated with a view to reference in the pathological study of insanity.

There are 79 entries in the Register of Restraint and Seclusion. These refer to the use of restraint in the treatment of 4 patients and in the use of seclusion in the treatment of 1 patient. The use of restraint was resorted to in the cases of 2 patients in order to prevent the removal of surgical dressings, and in the cases of the other 2 patients in order to prevent degrading practices and acts of violence in a patient of powerful build who was the subject of aggressive excitement. There have been 3 escapes in which the patients were absent for at least one night before being brought back. One accident is recorded—a case of suicide. The patient cut his throat by means of a pocket knife. Inquiry failed to discover by what means the patient obtained possession of the knife. The circumstances of the case were reported to the Procurator-Fiscal. The changes in the staff consist of 11 resignations and 11 engagements. There have been no dismissals.

The dayrooms and dormitories in the main building were found scrupulously clean and in excellent order. The aspect of the wards was one of comfort and brightness, and the ventilation and heating of all the rooms were most satisfactory. The hospital section merits the warmest admiration on account of the beauty of its internal appearance and the excellence of its arrangements for the care of sick and infirm patients. Such surroundings and comfort, coupled as they are with skilful medical treatment, cannot fail to be productive of the best possible results in the treatment of both mental and bodily disease. The Villa at Ravenswood provides excellent accommodation for ladies paying the higher rates of board. It is beautifully situated, and its arrangements are entirely free from features of an asylum character. The Gate Cottage constitutes a quiet and comfortable home for a selected class of female patients, and was found in admirable order.

The patients of all classes and in all sections of the asylum are well provided for. The administration of the institution is characterised by great ability and thoughtfulness. The impression created during the visit was that every detail in the management of the asylum is carefully considered by Dr Howden, and that every improvement is introduced which will conduce to the welfare and comfort of the patients and to the efficient administration of the institution.

The building of the branch asylum for private patients is progressing rapidly, but a considerable time must elapse before it is ready for occupation.

Two waiting rooms, one on the male side and one on the female, are about to be built in connection with the main building which will have new arrangements. Each room is to be divided into four cubicles. These will enable the patients to have a greater degree of privacy, in their interviews with the relatives who come to see them, than is possible when the waiting rooms consist of one room. This is a privilege which will be appreciated both by the patients and their relatives.

No patient belonging to the counties of Forfar and Kincardine, who on account of straitened circumstances is unable to pay from private sources a

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Montrose Royal Asylum.

higher rate of board than £25 a year, is refused admission to this asylum. In receiving patients of this class as private patients, the Directors are doing a public service of a charitable nature. Unless such persons were received as private patients at this rate, they would either have to forego asylum care and treatment, or their relatives would have to apply to the parochial authorities, and these patients would then have the stigma of pauperism attached to them. There are 37 private patients at present in the asylum whose rate of board is £25 a year. It is worthy of record that there is so large a number of such patients in the asylum, and that this needful class of the insane belonging to the two counties is admitted to the asylum at such a low rate of board.

The books and registers were examined and were found to be regularly and correctly kept.

Murray's Royal Asylum, Perth.

MURRAY'S ROYAL ASYLUM, PERTH,
17th April 1895.

There are 108 patients on the register of the asylum at this date. Fifty gentlemen and 52 ladies are under certificates, and 3 gentlemen and 3 ladies are voluntary inmates.

There are 4 ladies at present residing at the seaside mansion at Elie, and 1 gentleman is absent on pass.

Since the 23rd May 1894, the date of last visit, 15 gentlemen and 13 ladies have been admitted, 4 gentlemen and 4 ladies have been discharged recovered, 8 gentlemen and 6 ladies have been discharged unrecovered, and 3 gentlemen and 1 lady have died. The deaths are registered as due to hemiplegia, senile degeneration of the brain, general paralysis, and epilepsy. *Post-mortem* examinations were made in every case, and the results are recorded with fulness and scientific ability.

The Register of Restraint and Seclusion contains 2 entries. These refer to the use of restraint in the treatment of 3 patients for surgical reasons. There has been no accident of a serious character, and there has been no escape.

Twenty attendants or servants have resigned, none has been dismissed, and 23 have been engaged.

The patients were found admirably provided for; their accommodation is characterised by great comfort, and their surroundings are light and cheerful.

Thirteen gentlemen and 10 ladies are registered as on parole beyond the grounds, and 19 gentlemen and 14 ladies on parole within the grounds. These figures show that a large amount of liberty is accorded to those who are worthy of the privilege. Forty-seven gentlemen and 42 ladies are registered as being daily employed in useful work, and great interest is taken by the officials in the amusements and recreations of the patients.

The case of each patient is carefully studied, and fully and ably recorded in the Case Books.

The Hospital sections of the asylum are very complete in all their arrangements, and it was evident that the medical treatment of the patients is conducted with great care and skill.

The several parts of the asylum were found in excellent order, and great taste is displayed both in the furnishing and in the decoration of the various sections.

Great ability is exhibited in the management of the institution, and the impression left by the visit was of the most pleasant kind.

The books and registers were examined and were found regularly and correctly kept.

MURRAY'S ROYAL ASYLUM, PERTH,
27th August 1895.

There are 114 patients now on the registers of the asylum; of these, 56 gentlemen and 52 ladies are under certificates, and 3 gentlemen and 3 ladies are voluntary inmates.

Since last visit 10 gentlemen and 6 ladies have been admitted under certificates, 1 gentleman and 3 ladies have been discharged recovered, and 1 gentleman has died of brain disease. Besides these changes, 1 gentleman has been admitted as a voluntary inmate, and one gentleman who was a voluntary inmate has left.

The changes in the staff of attendants and servants are that 11 have left the service by resignation, and 12 have entered the service. Appendix B.

There has been no use of restraint or seclusion in the treatment of any patient. There has been no escape, and the most serious accident that has happened occurred to a lady patient who fell and sustained a severe bruise of the hip. Commissioners' Entries.

The asylum was found in excellent order. In the main building the rooms were all clean, well aired, and comfortable; and at Kincarrathie everything was as usual what might be looked for in a well appointed private mansion. The institution as a whole furnished excellent accommodation for persons belonging to the higher class of private patients. Royal and District Asylums.
Murray's Royal Asylum, Perth.

The patients continue to be skilfully and kindly dealt with. No complaint was made by any one of the way in which they are treated.

The occupation of the patients in work or recreation continues to receive great attention, and it is reasonable to attribute to this a great measure of the contentment which prevailed.

Fifty of the gentlemen and 43 of the ladies are registered as engaged daily in some form of useful work, 16 gentlemen being engaged in garden work, which may be regarded as the most healthy of all occupations.

The impression produced by the visit was in every respect satisfactory.

The books and registers were examined and were found regularly and correctly kept.

PERTH DISTRICT ASYLUM. Perth District Asylum.
17th April 1895.

There are 163 men and 144 women, or 307 in all, at present on the register of the asylum. They are all resident.

The following changes have taken place since 29th May 1894, the date of last visit :—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted.	46	31	77
Discharged recovered,	15	21	36
Discharged unrecovered,	19	9	28
Dead,	13	15	28

The deaths are registered as due in 15 cases to brain disease, in 3 cases to pneumonia, in 2 cases to consumption, in 2 cases to kidney disease, and in 1 case each, to heart disease, senile decay, cancer, septicæmia, strangulation of the bowels, and erysipelas. The mortality has been high but an epidemic of influenza prevailed in the asylum from October last, and attacked a large number of patients. This lowered their vitality, and was the indirect cause of many of the deaths. *Post-mortem* examinations were made in 27 cases and the results are recorded with care and fullness.

Of the 28 patients discharged unrecovered, 10 were transferred to other institutions, 12 were sent to the care of their relatives, and 6 were boarded out in private dwellings. These efforts to control the growth of the asylum population by discharging those patients who appear no longer to require asylum care and treatment are to be commended, as they constitute a policy which is advantageous to the patients and to the ratepayers.

There is no entry in the Register of Restraint and Seclusion. Only one escape is recorded in which the patient was absent over night before being brought back. Five accidents have occurred, four of which involved fracture of the bones. One was a self-inflicted wound in the throat which was superficial in character and healed quickly. Eleven attendants have resigned, two were dismissed, and sixteen have been engaged.

The patients were found excellently cared for. Their clothing attracted most favourable notice; it was of good quality, very tasteful, and pleasing in appearance. It was evident that the excellence of the clothing has a very beneficial effect on the behaviour of the patients. Except in the case of one male patient, there was no excitement during the visit, and no complaints were made. In fact the general contentment of the patients was a prominent feature in their condition. A well-cooked and abundant dinner, consisting of broth, meat-pie, haricot beans and bread, was served in a very orderly manner,

Appendix B.

Commissioners' Entries.

Royal and District Asylums.

Perth District Asylum.

during the visit, and complete tranquillity prevailed in the dining-hall. The industrial employment of the patients receives careful attention; 63 per cent. of the men and 74 per cent. of the women are daily occupied in useful and interesting work. The bi-weekly school is continued with advantage and success, and great attention is given to the amusements and recreations of the patients. There is no irksome discipline in the management of the asylum, and it is evident from the small number of escapes that every care is exercised in granting parole to the patients.

The dayrooms and dormitories were found scrupulously clean and in excellent order. They are comfortably and tastefully furnished. Plants and other articles of decoration give the dayrooms and corridors a most pleasing appearance. The extensions in the kitchen and scullery have been completed, and these improvements have added to the facilities of management in this department. Progress is being rapidly made in the building of the two new blocks, and it is expected that they will be ready for occupation this year. It is understood with approval that the east and west wings of the main building are to be converted into hospital accommodation on the most approved plans. These additions and improvements will add greatly to the efficiency of the asylum.

It is heard with satisfaction that the electric light is to be introduced into the asylum. This light has been proved to be safer, cooler, cleaner, and healthier than gas, and has been found eminently suitable for institutions for the insane.

Marked ability is shown in the administration of every department of the asylum. Dr Robertson's zeal and energy are devoted to the welfare of the patients and the success of the asylum.

The books and registers were examined, and were found regularly and correctly kept.

PERTH DISTRICT ASYLUM,
26th November 1895.

There are 167 men and 156 women on the register of the asylum. All of them are resident at this date and were seen during the visit.

Since 17th April, the date of last visit, the following changes have taken place:—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	24	34	58
Discharged recovered,	9	13	22
Discharged unrecovered,	7	2	9
Dead,	4	7	11

The deaths are registered as due in 3 cases to diseases of the nervous centres, in 1 case to heart disease, in 4 cases to lung disease, in 1 case to erysipelas, and in 2 cases to senile decay. *Post-mortem* examinations were made in 10 cases.

Neither restraint nor seclusion has been used in this asylum for some years. The last entry recorded in the Register of the use of either was made in January 1890. Three accidents are recorded since last visit, resulting in injuries to patients in 2 cases and to an attendant in 1 case. The patients' injuries were fracture of the femur and fracture of the fibula and were both due to accidental falls. The injury to the attendant was a fracture of the fibula received while struggling with a patient. There has been no instance of a patient having escaped.

The patients were found during the visit in an exceedingly satisfactory condition. Their requirements appear to be liberally and judiciously provided for in every way. No complaint was made, and there was great tranquillity in the wards.

The clothing of both men and women attracted attention by its cleanliness and tidiness. It is kept in good repair and great care is evidently taken both to prevent and correct slovenliness. The self-respect and orderliness of the patients are cultivated by giving them special clothing for Sundays and for other exceptional occasions. Most of the men have a special tweed suit for

Sundays ; and many of the women have not only Sunday dresses but also dresses for the evening entertainments. As far as possible the clothes are made specially for each patient, different styles being adopted for different cases and the gratification of individual tastes being judiciously encouraged. This not only tends to promote the contentment and good behaviour of the patients but also helps to make them forget that they are being treated as insane. When they are not all dressed according to an unvaried institutional pattern they are made to look more like sane people. This means that they are made really less insane ; and in the case of the curable it tends to promote their recovery. It was therefore, heard with pleasure that when a party of patients recently visited an exhibition of Highland games they were not recognised as coming from the asylum.

Appendix B.
Commissioners
Entries.
Royal and
District
Asylums.
Perth District
Asylum.

It is seen with approval that Dr Robertson endeavours in his management of the patients to diminish as far as possible the irksome discipline which cannot be altogether dispensed with. This is shown, for example, in the fact that nearly a third of the men are allowed to go about the grounds on parole, and that those to whom this liberty is accorded are judiciously selected is shown by there having been no recent case of the escape of a patient.

The administration of the asylum from the medical point of view is well attended to. Each patient, for some time after admission, is weighed once a week ; every patient is weighed at least once a month, and the cases of those patients who are found to be losing weight are specially considered. New departures have been made by the engagement of trained nurses on the female side of the asylum, one for the hospital, and one for the convalescent house, and by the fitting up of a room as a doctor's room in each hospital, for the special medical work connected with the treatment of the patients. A medical lecture is given every Wednesday evening for the instruction of the attendants and nurses. These are all indications of progress in the right direction.

The electric light is now used for illuminating purposes in all parts of the asylum, and its introduction is recognised as a great benefit. The furnishing of the wards has also been much improved by the introduction of small tables and of additional curtains, carpets, rugs and table covers. Several easy chairs and sofas have also been added. These additions have increased both the appearance of comfort and also the reality of it.

Apparatus for the heating of the main buildings by water of medium temperature is about to be fitted up.

The female convalescent house, one of the two new blocks of buildings which have been in progress for some time, has now been completed and is to be occupied immediately. It is gratifying to be able to speak of this house with high commendation. The plan of construction has been exceedingly well devised. The characteristics of a private dwelling rather than of a public institution have been successfully attained, while excellent provision has been made for the efficient supervision of the patients. The interior finishings, and the furnishing, are also admirable in every way ; and the District Board are to be congratulated on having conferred upon the insane of Perthshire a boon which is notable as an example both of generous feeling and of judicious consideration. It is satisfactory to learn that such excellent accommodation for the patients has been provided at a very moderate cost per bed. The corresponding building for men is expected to be ready for occupation early in the ensuing year.

A beginning has been made with the structural changes by which the wings of the main building are to be converted into hospitals. Two cottages have been built for the accommodation of married attendants, and it is proposed to erect others for the same purpose.

The District Board have at length succeeded in obtaining the long desired extension of the asylum estate. Thirty-four acres of adjacent land have been bought including 13 acres which had previously been rented. This addition to the estate has been urgently required to provide a means of disposing of the asylum sewage which will now be dealt with by irrigation. The land will be a valuable addition to the resources of the institution not only on this account but also because it will permit the development of agricultural work, the opportunity for which was previously insufficient.

The male patients have had abundance of outdoor occupation during the past year. In addition to the ordinary gardening and agricultural operations,

Appendix B.
Commissioners' Entries.

Royal and District Asylums.

Perth District Asylum.

Roxburgh District Asylum.

there has been a considerable amount of work done in connection with the new buildings, making new roads, digging out foundations and levelling. Fruit culture has also been begun by the planting of 4 acres of land with strawberries and 1 acre with raspberries.

From what has been said, it will be seen that the asylum is being managed with great energy and ability, and it may be added that the impression produced by the visit was in all respects of the most satisfactory kind.

The books and registers of the asylum were examined and were found regularly and correctly kept.

ROXBURGH DISTRICT ASYLUM,
24th April 1895.

There are 241 patients resident in the asylum at the present date. Eleven men and 7 women are private patients, and 104 men and 119 women are paupers. Besides the patients who are resident in the asylum, there are on the register 2 men and 4 women who are absent on probation.

The following changes have taken place since 24th July, the date of last visit :—

PRIVATE AND PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	19	26	45
Discharged recovered,	8	7	15
Discharged unrecovered,	4	7	11
Dead,	10	8	18

During the period to which these figures refer, 1 man and 1 woman have been transferred from the private to the pauper list, and 1 man has been transferred from the pauper to the private list.

The deaths are registered as due to brain diseases in 7 cases, to heart diseases in 2 cases, to lung diseases in 6 cases, to abscess of the kidney in 1 case, and to senile decay in 2 cases. *Post-mortem* examinations were made in all the cases.

The changes in the staff of attendants and servants have been 6 resignations, 4 dismissals, and the engagement of 11.

The Register of Restraint and Seclusion contains 11 entries. They all refer to the use of mechanical restraint to prevent a patient who was suffering from the effects of a burn from removing the medical dressings. Three patients who escaped were absent for one or more nights before being brought back. The only serious accident recorded is the burn already referred to. It occurred in the case of a patient who suddenly threw herself upon a fire and was burnt in the neck and arm and head before she could be taken away. She has now nearly recovered from the effects of the injury. She had not, previous to this occurrence, shown any tendency to injure herself.

The crowded state of the female side of the asylum continues to be a source of anxiety ; but it is understood that plans have now been obtained by the District Board for additional buildings, which will be submitted at an early date to the General Board.

The patients were found, during the visit, in as satisfactory a state as the overcrowding of the female side will permit. They were clean in person, suitably clothed, and their other requirements are well provided for.

During the last four weeks, the asylum has been visited by an epidemic of influenza. As has frequently been the case in asylums, the staff of officials has suffered much more than the patients, 23, or more than half of the resident staff of 37, having been attacked, while only 26, or about 1 in 9 of the 240 patients, were attacked. The epidemic seems now to have subsided.

The dayrooms, dormitories, and other parts of the asylum were found in good order.

It is understood that the District Board are endeavouring to obtain a considerable addition to the land attached to the asylum. It is greatly to be desired that their efforts will be successful, as the present extent of land is much too limited for the wants of the institution.

Nothing has yet been done to provide an additional supply of water. The urgent necessity for this is again pressed on the attention of the District Board.

The books and registers of the asylum were examined, and were found regularly and correctly kept.

ROXBURGH DISTRICT ASYLUM,
29th November 1895.

There are 248 patients on the register of the asylum at this date. Eleven men and 7 women are private patients, and 105 men and 125 women are paupers. At present 2 men and 2 women are absent on Statutory probation. There are therefore 244 patients resident, all of whom were seen.

Since last visit 1 private male patient has become a pauper.

The changes which have taken place since the 24th of April, the date of last visit, are as follows :—

PRIVATE PATIENTS. PAUPER PATIENTS.

	M.	F.	M.	F.	TOTALS.
Admitted,	1	1	15	19	36
Discharged recovered,	—	—	9	12	21
Discharged unrecovered,	—	1	3	3	7
Dead,	—	—	5	2	7

The deaths are registered as due to brain diseases in 4 cases, to heart disease in 2 cases, and to congestion of the lungs and exhaustion from the effects of a wound in the throat self-inflicted prior to admission, in 1 case.

In the cases of all the patients who died, except 1, *post-mortem* examinations was made.

The Register of Restraint and Seclusion contains 11 entries. They refer to the seclusion of 2 patients for periods varying from 1½ to 8 hours on account of excitement and violence. Two accidents are recorded, but they are not of a serious character. There have been two escapes in which the patients were absent for at least 1 night before being brought back. The changes in the staff consist of the resignation of 3 attendants and the engagement of 3.

All parts of the asylum were found scrupulously clean, well aired, and in excellent order. The temperature of the dayrooms was satisfactory. The requirements of the patients are liberally provided for, and they appear to be treated with kindness and consideration. They were remarkably free from excitement, and no reasonable complaint was made by any inmate. An abundant and well cooked dinner was served in an orderly manner during the visit. The records in the Case books shew that the mental and bodily condition of each patient is studied with great care, and that everything is done to promote recovery. It was everywhere evident that the asylum is managed with marked ability and conscientiousness.

The overcrowded condition of the female side continues undiminished. Plans have however been prepared for the erection of a hospital block, for female patients, and estimates for the building of this block are at present under the consideration of the District Board. Every detail in these plans has been most carefully considered by the District Board assisted by Dr Johnstone and their Architect, and it is believed that this building will, when completed, take a foremost place among the hospitals for the insane in Scotland.

The District Board are applying for parliamentary powers to obtain an abundant supply of water either from land at the base of the Eildon Hills or from Ladymoss. It is hoped that in either of these ways they will be successful, as the present water supply to the asylum is, as has been repeatedly pointed out in previous entries, both seriously deficient in quantity and unsatisfactory in quality.

An effort is about to be made by the District Board, also by means of a Bill in Parliament, to obtain 25 acres of land which adjoin the asylum grounds.

The present extent of land possessed by the asylum has long been inadequate to supply the male patients with the healthy outdoor work, which is an important, indeed an essential therapeutic agent in the treatment of the

Appendix B.
Commissioners' Entries.
Royal and District Asylums.
Roxburgh District Asylum.

92 Appendix to the Thirty-eighth Report of the General Board of

Appendix B. patients. The District Board are therefore right in endeavouring by every legitimate method to obtain additional land by which the asylum will be made more efficient in the treatment of the insane.

Commissioners' Entries. The books and registers were examined, and were found regularly and correctly kept.

Royal and District Asylums.

Stirling District Asylum.

STIRLING. DISTRICT ASYLUM,
25th and 26th March 1895.

There are at present 565 patients on the register of the asylum. Of these 16 men and 13 women are private patients and 273 men and 263 women are paupers. Five patients are absent on statutory probation and two are absent on pass.

The following changes have occurred since the 8th October 1894, the date of last visit :—

	PRIVATE PATIENTS.		PAUPER PATIENTS.		TOTALS.
	M.	F.	M.	F.	
Admitted,	3	—	41	31	82
Discharged recovered,	2	—	17	23	42
Discharged unrecovered,	1	1	6	6	14
Dead,	1	—	15	12	28

The deaths are registered as due in 5 cases to brain disease, in 6 cases to pneumonia, in 4 cases to consumption, in 2 cases to heart disease, in 2 cases each to kidney disease, and influenza, and in 1 case each to senile decay, to erysipelas, to strangulated hernia, to cancer, to peritonitis and to suffocation during an epileptic fit. *Post-mortem* examinations were made in 23 cases and the results are recorded with a fulness which shows pathological research of an able character. Over 50 per cent. of the deaths occurred among patients who were admitted since the beginning of 1894.

Eight attendants and servants have resigned and ten have been engaged. The attendants in this institution have comfortable bedrooms and well furnished sitting rooms. They are well taught and trained by means of clinical and systematic lectures.

The number of entries in the Register of Restraint and Seclusion is 3. These refer to the use of seclusion for periods varying from 2 to 8 hours in the treatment of 3 patients. There have been 3 escapes in which the patients were absent over night before being brought back. One accident has occurred, the suffocation already referred to of a patient during an epileptic fit while in bed. The circumstances attending this death were fully reported to the Procurator-Fiscal and the General Board, and no blame was attached to those in charge.

The drainage of the asylum is this year to be connected with the drainage of the Larbert district. In consequence of this, the cost and trouble of filtering the asylum sewage will be done away with.

The greenhouse has been considerably enlarged and there will now be a plentiful supply of decorative plants for the wards.

The condition of the dormitories in the main building compares very unfavourably with the rest of the institution. It is recommended that steps should be taken without delay to improve and renovate these dormitories, so that the same excellence of accommodation shall obtain in all sections of the institution.

The hospital section attracted special attention. Its arrangements for the care and treatment of those patients who require special nursing cannot be too highly praised, and it places the asylum among the best institutions for the insane in Scotland.

The asylum was found in excellent order and scrupulously clean. The patients bore every evidence of satisfactory care, their dietary is suitable and sufficient their clothing is neat, tidy, and of good quality. The management of the asylum by Dr Macpherson, both from a general and medical point of view, is characterised by administrative and scientific ability of a high order.

Overcrowding was during the visit apparent in several sections of the institution. There are 65 more patients at present in the asylum than it can properly accommodate, and there is no prospect of this overcrowding being

relieved, except to the slight degree that will result from the removal of 15 Lanarkshire patients on the opening of the new asylum at Hartwood. The experience of recent years, and the fact that the population of the Stirling Lunacy district is steadily increasing leaves no doubt indeed that the number of patients will go on increasing, and that the overcrowding will be intensified until some additional accommodation is provided. It is understood that the District Board have under consideration the immediate providing of the requisite addition, and it cannot be provided too soon.

The books and registers were examined and were found regularly and correctly kept.

Appendix B.
Commissioners' Entries.

Royal and District Asylums.

Stirling District Asylum.

STIRLING DISTRICT ASYLUM,
18th and 23rd July 1895.

There were on the first day of the present visit 565 patients on the register of the asylum. Fifteen men and 16 women were private patients, and 269 men and 265 women were paupers. All were resident in the institution, and were seen during the visit, except 1 male private patient and 3 male paupers who were absent on statutory probation, and 1 male private patient who was absent on pass. The main building of the asylum contained 303 patients, the succursal block contained 158, and the hospital contained 99.

Since 25th March last, the date to which the numbers in the preceding entry refer, the following changes have taken place:—

PRIVATE AND PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	31	38	69
Discharged recovered,	19	16	35
Discharged unrecovered,	7	9	16
Dead,	10	8	18

Besides these changes, 1 patient has left who was resident as a voluntary inmate at the time of last visit.

The deaths are registered as due in 4 cases to diseases of the brain, in 4 cases to diseases of the heart and large vessels, in 8 cases to diseases of the lungs, in 1 case to intestinal obstruction, and in 1 case to exhaustion from acute excitement. *Post-mortem* examinations were made in 13 cases.

The changes among the attendants and servants have been 5 resignations and 8 engagements.

The Register of Restraint and Seclusion contains 23 entries. They refer to the use of restraint in the treatment of 1 patient, and to the use of seclusion in the treatment of 4 patients. The restraint was employed to keep a patient for a time in the recumbent position who persisted when unrestrained in preserving constantly the erect posture, and had thus brought on severe oedema of the legs and feet. There has been no accident of a serious nature. In 4 cases of escape the patients were not brought back before they had been absent from the asylum for at least one night.

The asylum was found during the visit in excellent order as far as its present overcrowded condition will allow. The hospital wards and corridors, and the dayrooms in the main and succursal blocks were very bright and pleasant to look at, owing, in addition to the tasteful and comfortable character of the furniture, to the profusion of beautiful plants with which they were decorated.

The patients were also in a satisfactory condition. Their demeanour showed that care is taken to make their detention in the asylum as little irksome as possible. The clothing both of men and of women was suitable, and in remarkably good order.

It is unnecessary to add to what has been said in recent entries as to the overcrowding of the asylum. The overcrowding is great, and no time should be lost in commencing the erection of the new buildings on which the District Board have resolved. Fortunately the number of the inmates has not increased during the last nine months, and it is satisfactory to find that this pause in the upward progress of the numbers is partly due to the admission rate during that time having been somewhat less than it was during the period immediately preceding. Other causes, however, such as the removal of

Appendix B.
 Commissioners' Entries.

Royal and District Asylums.

Stirling District Asylum.

patients to the newly-opened asylum for the Lanark District at Hartwood, have contributed to keep down the number of inmates, and there is every reason to believe that the number will soon show a considerable increase, and that the evils of overcrowding will be correspondingly intensified.

It is understood that there is at present a possibility of the District Board acquiring a farm which lies very conveniently adjacent to the asylum. It will be an inestimable advantage to the asylum if this is accomplished. An addition to the land attached to the asylum is much wanted, and no addition could be made which would be a more desirable extension of the estate than that which is understood to be under consideration.

It is proper to draw the attention of the District Board to the absence of any regular arrangement for religious service in the case of the Roman Catholic patients. There are at present 48 such patients in the asylum, and it is recommended for consideration whether arrangements might not be made for an occasional service by a clergyman of their communion.

The books and registers were examined, and were found regularly and correctly kept.

PRIVATE ASYLUMS.

Private Asylums or Licensed Houses.

Mavisbank Asylum.

MAVISBANK ASYLUM,
 9th April 1895.

Twenty-three gentlemen and 22 ladies are resident as patients in the asylum at this date. Of these, 18 gentlemen and 21 ladies are under certificates, and 5 gentlemen and 1 lady are voluntary inmates. In addition there is on the register 1 gentleman who is absent on probation.

Since 23rd August, the date of last visit, there have been admitted under certificates 3 gentlemen and 3 ladies; 3 ladies have been discharged recovered, 5 gentlemen and 4 ladies have been discharged unrecovered, and 2 gentlemen and 2 ladies have died. The changes among the voluntary inmates have been the admission of 3 gentlemen, and the discharge of 3 gentlemen and 2 ladies. Two of the deaths were due to general paralysis, 1 to bronchitis, and 1 to dysenteric diarrhoea.

The Register of Restraint and Seclusion contains 4 entries. They refer to the use of seclusion 4 times in the treatment of two patients. There has been 1 escape where the patient was not brought back on the day of escape. No accident has happened to any patient.

The asylum was found everywhere in excellent order, comfortably heated, and well-aired. Repairs and redecorations receive due attention. A desirable improvement is about to be effected in the sanitary arrangements for the gentlemen.

A change of an important character has just been made in the staff on the female side of the house. Lady nurses have been substituted for ordinary attendants. This is a change in a right direction, and it may be expected that it will be attended with great benefit to the patients. It is reasonable to suppose that they will be more easily influenced by persons in their own rank of life, and will derive more advantage from their sympathy and companionship.

Many things were seen during the visit which showed that the asylum is being conducted with ability and success.

The books and registers were examined.

MAVISBANK ASYLUM,
 28th November 1895.

There are 43 certificated patients—19 gentlemen and 24 ladies—on the register of the asylum at this date, and they are all resident except one gentleman who is absent on probation. There are also 1 gentleman and 4 ladies resident in the asylum as voluntary inmates. The whole number of inmates resident at this date is 47.

The changes among the certificated patients since last visit are as follows :— 5 gentlemen and 5 ladies have been admitted, 3 gentleman and 2 ladies have been discharged, and 1 gentleman has died. The death is registered as due to phthisis pulmonalis. The changes among the voluntary inmates during the same period are as follows :—3 gentlemen and 3 ladies have been admitted and 7 gentlemen have left.

The Register of Restraint and Seclusion contains 102 entries. They refer to the use of Seclusion in the treatment of two patients and to the use of Restraint in the treatment of three patients. There has been 1 escape in which the patient was absent one night before being brought back. No accident is recorded.

The changes among the staff consist of the resignation of 4 attendants or nurses, the dismissal of 1 and the engagement of 5. The staff on the female side consists of 5 lady nurses, and the employment of this class of nurses has been found to conduce to the happiness and contentment of the ladies.

An assistant medical officer has recently been appointed. This addition to the medical staff of the asylum is one which meets with cordial approval as it obviates the necessity of placing a medical man, who is a stranger to the patients, in charge of the asylum during the absence of the Medical Superintendent.

It is understood with satisfaction that extensive renovations and repairs of the plumbing and sanitary arrangements of the asylum are about to be effected. These improvements will add to the efficiency of the institution and improve its sanitary condition.

The patients were found in a very satisfactory condition and well provided for. There was a complete absence of excitement, and no reasonable complaint was made by any of the inmates. The dayrooms and bedrooms are comfortably and tastefully furnished, and the temperature of the house was everywhere satisfactory.

The books and registers were examined and were found to be regularly and correctly kept.

MOLLENDO HOUSE ASYLUM,
20th April 1895.

Mollendo
House
Asylum.

There are 11 patients in the asylum at this date, 2 male and 9 female. Since last visit 2 ladies have been discharged unrecovered, and 1 lady has died.

There has been no use of restraint or seclusion in the treatment of any of the patients, and no accident has occurred to any patient.

The patients were all seen during the visit and were found in a satisfactory condition. They are kindly and carefully attended to, and they are provided with comfortable accommodation. The house was found in excellent order.

The books and registers were examined and were found regularly and correctly kept.

MOLLENDO HOUSE ASYLUM,
24th July 1895.

There are 3 men and 9 women in the asylum at this date. Since last visit 1 man has been admitted. There have been no discharges or deaths.

The establishment was found clean, well ventilated and in good order. The condition of the patients was satisfactory, and they are evidently treated with much kindness and consideration. They were free from complaint. Four patients are on parole beyond the grounds.

The books and registers were examined and were found correctly kept.

SAUGHTON HALL ASYLUM,
8th April 1895.

Saughton Hall
Asylum.

There are 68 patients at this date in the asylum. Of these 30 gentlemen, and 34 ladies are under certificates, and 1 gentlemen and 3 ladies are voluntary inmates.

Since 28th June, the date of last visit, the following changes have taken place among the certificated patients :—3 gentlemen and 7 ladies have been

Appendix B.

Commissioners' Entries.

Private Asylums or Licensed Houses.

Saughton Hall Asylum.

admitted, 1 gentleman and 6 ladies have been discharged recovered, 3 gentlemen and 1 lady have been discharged unrecovered, and 1 gentlemen and 4 ladies have died. Of the voluntary inmates 1 gentleman and 4 ladies have been admitted, and 1 gentleman and 3 ladies have left.

The deaths are registered as due in 1 case to general paralysis, in 1 case to congestion of the brain, in 2 cases to heart disease, and in 1 case to influenza.

The Register of Restraint and Seclusion contains 23 entries. They refer to the use of mechanical restraint in the treatment of 2 cases, and to the use of seclusion in the treatment of 2 cases. The restraint was used in 1 case to prevent the removal of surgical dressings, and in the other case on account of suicidal impulse. The only serious accident recorded is the fracture of 2 ribs, which occurred to a patient in a state of violent excitement during a struggle with attendants.

The asylum was found in excellent order. The patients are well cared for, and skilfully treated. They enjoy a large amount of liberty, restrictions of a specially asylum character being largely dispensed with, and the daily life of the patients being made as far as possible, like that of a private household.

Everything that was seen during the visit tended to show that the management of the institution continues to be admirably conducted.

The books and registers were examined, and were found to be regularly and exactly kept.

SAUGHTON HALL ASYLUM,
27th December 1895.

There are 67 patients on the register of the asylum at this date. Of these, 28 gentlemen and 33 ladies are certificated, and 6 ladies are voluntary inmates. One lady, a voluntary inmate is temporarily absent.

The following changes have taken place among the certificated patients since the date of last visit :—8 gentlemen and 7 ladies have been admitted, 3 gentlemen and 3 ladies have been discharged recovered, 4 gentlemen and 2 ladies have been discharged unrecovered, and 3 gentlemen and 3 ladies have died. The changes among the voluntary inmates are as follows :—1 gentleman and 3 ladies have been admitted, and 2 gentlemen have left.

The deaths are registered as due to heart disease in 2 cases, and to brain disease, phthisis pulmonalis, senile decay, and syncope in 1 case each. The patient who died from syncope at a very advanced age, had been an inmate of the asylum since 1830.

The Register of Restraint and Seclusion contains 2 entries referring to the use of restraint in the treatment of 1 patient, and to the use of seclusion in the treatment of 1 patient. There has been no accident and no escape.

The two sections of this establishment, Saughton Hall and Balgreen have all the features of well appointed residences for persons in affluent circumstances. They are comfortably and elegantly furnished, and were found in excellent order. No door was found locked, and the whole establishment is as free as possible from asylum arrangements.

The patients are provided for in a very liberal manner, and there was no excitement and no complaint. The case-books show that the mental and bodily condition of each patient is carefully studied, and that the general and medical treatment of the patients is characterised by high professional ability.

The staff is a large one, and consists of 2 matrons, 2 lady companions, and 27 nurses and attendants.

The books and registers were examined, and were found regularly and correctly kept.

Westermains Asylum.

WESTERMAINS ASYLUM,
21st March 1895.

There are 2 gentlemen and 12 ladies under certificates in this asylum. There are also 3 ladies resident who are voluntary inmates.

The only change since last visit is the death of a lady. The cause of death was old age and debility.

The house was found in excellent order, scrupulously clean and handsomely furnished. The patients show every evidence of satisfactory care, and they live in surroundings which do not differ from those of their own homes.

The books and registers were examined, and were found regularly and correctly kept.

WESTERMAINS ASYLUM, Appendix B.
22nd August 1895.

Commissioners' Entries.

There are 2 gentlemen and 11 ladies at present in the asylum under certificates, and 2 ladies are resident as voluntary inmates.

Since last visit 2 ladies have been admitted under certificates, 1 has been discharged recovered, and 2 who became unsuitable were transferred to other establishments. One lady who was a voluntary inmate also became unsuitable and was removed.

Private Asylums or Licensed Houses.

The asylum was found in excellent order, and the patients continue to be well provided for. The visit left a very favourable impression as to the way in which the patients are treated.

Westermains Asylum.

The books and registers were examined, and were found regularly and correctly kept.

WHITEHOUSE ASYLUM, Whitehouse
20th April 1895. Asylum.

There are four gentlemen and 9 ladies at present in the asylum under certificates, and there are 2 ladies who are voluntary inmates.

Since last visit 1 lady has died from apoplexy. No patient has been admitted and none has left. The asylum continues to have all the features of a comfortable home, and the patients could not be better provided for.

The books and registers were examined, and were found regularly and correctly kept.

WHITEHOUSE ASYLUM,
24th July 1895.

There are 14 patients resident in the asylum at this date; 4 gentlemen and 8 ladies are under certificates, and 2 ladies are voluntary inmates.

The only change since the date of last visit is the death of 1 lady. The cause of death was cancer of the breast.

The condition of the patients was most satisfactory. They are treated with great kindness and liberality, and they were tranquil and contented. The house was found in admirable order, and it is most tastefully and comfortably furnished. The visit left a very pleasing impression as to the care and comfort of the patients.

The books and registers were examined, and were found regularly and correctly kept.

PAROCHIAL ASYLUMS.

Parochial Asylums.

ABBEE PAROCHIAL ASYLUM,
22nd February 1895.

There are 50 men and 50 woman at present resident in the asylum.

Since the date of last visit, 5th October 1894, the following changes have taken place:—

Abbey Parochial Asylum.

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	12	8	20
Discharged recovered,	6	3	9
Discharged unrecovered,	2	6	8
Dead,	2	4	6

The deaths were due in 2 cases to heart disease, in 2 cases to tuberculosis, in 1 case to senile decay, and in 1 case to abscess. *Post-mortem* examinations were made in 4 cases.

There are 8 entries in the Register of Restraint and Seclusion referring to the restraint of 2 patients, and the seclusion of 1. A male patient was restrained by means of the strait jacket on 6 occasions, on account of excite-

Appendix B.

Commissioners' Entries.

Parochial Asylums.

Abbey Parochial Asylum.

ment and violence. Another male patient was found at the visit in a strait jacket. He had fallen into the fire previous to his admission two days ago, and the whole of his face was severely burnt. The restraint was used to prevent his interference with the surgical dressings. There has been no escape and no accident. There has been 1 attendant dismissed, 2 have resigned, and 3 have been engaged.

The condition of the institution was satisfactory. The dayrooms and dormitories were scrupulously clean and in excellent order. The painting and decorating which was effected last year has caused the wards to have a bright and cheerful appearance. The effect of cheerful and comfortable surroundings is most salutary, and leads to contentment and quietude among the patients. There was no excitement during the visit, and no complaints were made. The temperature of the wards was very satisfactory, and the bed-clothing was ample in quantity, and excellent in quality.

It is recommended that the floors of the single rooms be varnished and waxed, so as to avoid the wet scrubbing, which is apt to be inimical to health.

The patients were clean in person, and were well and tastefully clothed. The clothing of both the male and female patients calls for special commendation. The occupation of the patients receives every attention, and no patient who is mentally or bodily fit for employment is idle. The dinner served during the visit was palatable and abundant.

The management of the asylum continues on broad and liberal principles, and the results are satisfactory.

The books and registers of the asylum were examined, and were found accurately kept.

PAISLEY PAROCHIAL ASYLUM, CRAW ROAD,
[ABBAY PAROCHIAL ASYLUM], 31st October 1895.

There are 49 men and 53 woman on the register of the asylum. All are resident and were seen during our visit, except 1 man, who is absent on statutory probation.

Since 22nd February, the date of last visit, 21 men and 16 woman have been admitted; 12 men and 5 women have been discharged recovered; 4 men and 6 women have been discharged unrecovered; and 6 men and 2 women have died.

The deaths are registered as due to diseases of the brain in 2 cases, to diseases of the lungs in 2 cases, and to enteritis, parotitis, anæmia, and wound of the windpipe, each in 1 case. A *post-mortem* examination was made in 1 case.

The Register of Restraint and Seclusion contains no entry, and there has been no case of escape in which the patient was absent over night before being brought back. One accident is recorded, a self-inflicted wound of windpipe, which ended fatally. It occurred in the case of a patient, who at the time was, though on the register of the asylum, not resident in the institution, being absent on probation.

The patients were found in a satisfactory condition, and the wards were in excellent order.

The attention of the Committee should be called to the fact that there are no arrangements for night attendance, except by laying the duty on officials who are fully occupied during day-time. If the asylum is to continue to receive recent and acute cases, night attendants should be appointed, who would be free from duty during the day—1 for the male side, and 1 for the female side.

The books and registers were examined, and were found regularly and correctly kept.

Barony Parochial Asylum.

BARONY PAROCHIAL ASYLUM,
20th and 21st March 1895.

There are at present 357 men and 370 women—727 in all—on the register of the asylum. These are all resident, except 1 male patient who is absent by

escape. Of the 727 patients on the register of the asylum, 610 are chargeable to the Barony Parish, and 117 to other parishes in the county of Lanark. There is an increase of 37 patients chargeable to Barony, since the date of last visit. Appendix B.
Commissioners' Entries.

The following changes have occurred since 23rd October 1894, the date of last visit :— Parochial Asylums.

	PAUPER PATIENTS.			Barony Parochial Asylum.
	M.	F.	TOTALS.	
Admitted,	87	69	156	
Discharged recovered,	31	35	66	
Discharged unrecovered,	14	20	34	
Dead,	17	18	35	

The deaths are registered as due in 21 cases to brain disease, in 4 cases to senile decay, in 3 cases to heart disease, in 3 cases to consumption, and in 1 case each to pneumonia, nephritis, cystitis, and goitre. *Post-mortem* examinations were made in 19 cases. The results of these examinations are at present being recorded with great care and fulness.

Of the 34 patients discharged unrecovered, 17 were transferred to other asylums, 1 was boarded out, and 16 were given over to the care of relatives.

The Register of Restraint and Seclusion contains 30 entries referring to the use of seclusion, for periods varying from 2 to 8 hours, in the treatment of 9 patients. There have been 6 escapes in which the patients were absent over night before being brought back. Six accidents are recorded, 1 involving a fracture of the humerus, and 1 a fracture of the clavicle, but the other 4 were not of a serious character. Eighteen attendants have resigned, 1 was dismissed, and 25 have been engaged.

Several improvements and additions which have been in progress in this asylum for a considerable time, are now nearly finished. New lavatory and water-closet arrangements are at present being put into certain sections of the main buildings, and when these are completed, the asylum will once more be free of workmen. The new buildings and the extensive improvements in the main buildings, place the asylum in a most efficient condition to meet the increased demand on its accommodation. The dining and amusement halls have been painted and decorated with great taste, and a large amount of painting and papering has been done in other parts of the institution. The extensions of the store will add to the facilities of management, and the new bathrooms and dressing-rooms will render the bathing of the patients safe and comfortable.

New arrangements for the admission of patients are about to be made. In lieu of admitting them at the central door of the institution, there is to be an admission room, both on the male side and on the female side, adjoining the wards. This improvement will be advantageous in the admission of helpless and excited patients.

The condition of the patients was very satisfactory in all sections of the institution. They were warmly and suitably clothed, and their general health indicated a sufficiency as to dietary and open air exercise. A well-cooked dinner was served in the dining hall in a very orderly manner during the visit, and there was a complete absence of excitement during the meal. The industrial occupation of the patients is well attended to. Of the 356 males resident, 249 are recorded as being usefully employed, and of the 370 females, 287 are engaged in the wards, kitchen, and laundry, or at needlework.

The books and registers were examined, and were found regularly and correctly kept.

BARONY PAROCHIAL ASYLUM,
24th and 25th June 1895.

There are 719 patients on the register of the asylum at present. Of these, 354 are men, and 365 are women, and all were seen during the visit except 1 man and 1 woman who are absent on pass.

Appendix B. The following changes have taken place since 20th March, the date of the preceding entry:—

Commissioners' Entries.

Parochial Asylums.

Barony Parochial Asylum.

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	52	48	100
Discharged recovered,	17	18	35
Discharged unrecovered,	26	21	47
Dead,	12	14	26

The number of patients admitted to the asylum is now much larger than it used to be. Until about two years ago the average admission rate had been for some years about 15 patients a month, but since that time the average rate has been considerably more than twice that number. A large proportion of the increase is due to the reception of patients belonging to parishes in the Lanark district where asylum accommodation was deficient. Patients from these parishes will now be sent to the recently opened asylum at Hartwood.

The deaths are registered as due in 10 cases to diseases of the brain, 8 of these being cases of general paralysis, in 7 cases to diseases of the heart and lungs, in 6 cases to senile decay, and in 1 case each to Addison's disease, exhaustion from acute mania, and typhoid fever. *Post-mortem* examinations were made in 19 cases.

The number of attendants and servants engaged since last visit is 8, the number resigned 6, and the number dismissed 2.

The Register of Restraint and Seclusion contains 6 entries. They refer to the use of restraint for a few hours in the treatment of 1 patient, and to the use of seclusion in the treatment of 5 patients.

There have been 2 cases of escape in which the patients were not brought back till after they had been at least one night absent from the asylum. No serious accident has occurred to any patient.

The work involved in the erection of new buildings and in the alterations of parts of the old building which has been going on during the last four years is now completed, and the additional accommodation which has been provided is now in the hands of the asylum authorities. The administration of the institution which was carried on under considerable difficulty while that work was proceeding is therefore restored to its normal condition, and the overcrowding to which the patients were subjected in certain parts of the asylum has now ceased.

The additions and alterations have not only increased the accommodation so as to make it ample for the wants of the district, they have also improved its character. The hospital sections, the bathrooms, lavatories, and shoe rooms, the dining hall and the recreation room, the stores, and the accommodation for the attendants have all been improved; and as a general result of the additions and changes a means has been furnished of obtaining a more efficient classification of the patients than has hitherto been possible. In any re-arrangement which may be made, of the purposes to which the different parts of the buildings are devoted, the hospital sections should be made to include as much as possible. This is necessary on account of the increasingly large proportion of hospital cases which are admitted to the asylum. Patients are much more frequently than they used to be sent to asylums for reasons connected with their bodily more than with their mental condition. Many who, though of unsound mind, would not require asylum treatment on account of their mental condition are sent to the asylum because they require hospital treatment. Such patients are generally persons in states of decay and decrepitude, both mental and bodily, who have been found difficult to deal with in private dwellings and unfit for treatment in ordinary hospitals, and it is becoming more and more the custom to send them to asylums.

It is proper to draw the attention of the Asylum Committee to the circumstance that there is no regular arrangement for religious services for the Roman Catholic patients. The number of these patients is now considerable—about 80 at the present date—and it is recommended that suitable provision should be made for them.

The books and registers were examined and were found regularly and correctly kept.

CITY OF GLASGOW PAROCHIAL ASYLUM, Appendix B.
21st February 1895.

Commissioners' Entries.

There are at present 124 women resident in the wards.
Since the date of last visit, 19th May 1894, 42 women have been admitted, 21 have been discharged recovered, 13 have been discharged unrecovered, and 11 have died.

The deaths were due to diseases of the brain in 6 cases, to diseases of the heart and lungs in 3 cases, and to phthisis in 2 cases.

There is no entry in the Register of Restraint and Seclusion; there has been one escape, and no accident has occurred. Only one change among the attendants has taken place during the last eight months.

The establishment, notwithstanding the many defects in the position and structure of the building, continues to be very well managed. The condition of the patients as to clothing and tidiness was very satisfactory, and the wards were clean and in good order. There was no excitement during the visit and no complaints were made. The dinner, consisting of meat-pie, vegetables and bread, was served in an orderly manner, and the physical condition of the patients was indicative of a suitable and liberal dietary.

The books and registers were examined and were found regularly and correctly kept.

Parochial Asylums.

Glasgow Parochial Asylum.

CITY OF GLASGOW PAROCHIAL ASYLUM,
8th October 1895.

There are 126 patients in the wards at this date.

Since 21st February, the date of last visit, 37 patients have been admitted, 9 have been discharged recovered, 12 have been discharged unrecovered, and 14 have died.

The deaths are registered as due to diseases of the heart in 3 cases, to diseases of the lungs in 8 cases, to chronic diarrhoea in 1 case, to acute delirious mania in 1 case, and to puerperal mania in 1 case. The death rate has been high, and the large number of deaths from diseases of the lungs deserves notice.

The Register of Restraint and Seclusion contains 1 entry. It refers to the use of locked gloves to prevent a patient undoing the bandages applied to a fractured leg. There have been 2 accidents, 1 a fracture of the leg and 1 a fracture of the arm. No blame was attached to the attendants in either case. There has been no escape by any patient.

The wards were found in excellent order, and the patients continue to receive kindly treatment.

The books and registers were examined and were found regularly and correctly kept.

GOVAN PAROCHIAL ASYLUM, Govan Parochial Asylum.
5th March 1895.

There are 111 men and 126 women at present on the register of the asylum, and there is 1 woman absent on ordinary pass, so that there are 236 patients resident in the institution.

Since the date of last visit, 18th October 1894, the following changes have taken place :—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	15	15	30
Discharged recovered,	7	5	12
Discharged unrecovered,	34	5	39
Dead,	3	6	9

These figures show that there is a decrease of 30 patients in the population of the asylum since it was last visited. This is mainly due to the transfer of 24 men to the Govan District Asylum at Hawkhead. Relief to the overcrowding at Merryflatts has been effected by this procedure, and by the boarding out in private dwellings of these patients who appear to be suitable for that mode of provision.

Appendix B.

Commissioners' Entries.

Parochial Asylums.

Govan Parochial Asylum.

The deaths are registered as due in 2 cases to brain disease, in 2 cases to consumption, and in 1 case each to puerperal peritonitis, to pneumonia, to cancer, to heart disease, and to melancholic exhaustion. *Post-mortem* examinations were made in 2 cases.

Since last visit Dr Watson, who was for 11 years Medical Officer to this asylum, has been appointed Medical Superintendent of the Govan District Asylum at Hawkhead, and Dr Richard has been appointed Medical Officer to this institution in his stead.

There is no entry in the Register of Restraint and Seclusion. There has been only 1 escape, and no accidents have occurred. Seven attendants have resigned and 4 have been engaged.

The wards were found in excellent order and very clean. The bedding was ample in quantity and of good quality, the coverings of one of the beds were weighed and found to be 24lbs. The dinner was served in a very orderly manner, and consisted of broth, beef and potatoes. The behaviour of the patients in the dining hall and in the wards was free from excitement. No complaints were made during the visit. The patients were suitably and warmly clothed, and their general health is satisfactory.

The management of the asylum is characterised by ability and conscientiousness, and the patients are evidently treated in a kindly and liberal manner.

The books and registers were examined, and were found regularly and correctly kept.

GOVAN PAROCHIAL ASYLUM,
28th October 1895.

There are 112 men and 93 women in the asylum as patients at this date.

Since 5th March, the date of last visit, the following changes have taken place :—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	25	25	50
Discharged recovered,	9	11	20
Discharged unrecovered,	7	40	47
Dead,	8	7	15

The patients discharged unrecovered include 32 women who have been transferred from this institution to the new District Asylum at Hawkhead. If these patients are left out of account, the number of patients admitted is exactly balanced by the number discharged and dead. The dormitories on the female side of the ordinary poorhouse, which have for some time been occupied by lunatics, have now been restored to their original position as ordinary wards. This reduction of the amount of accommodation for lunatics has been made practicable by the removals to Hawkhead.

The deaths were due in 4 cases to diseases of the brain, in 1 case to disease of the heart, in 4 cases to disease of the lungs, in 3 cases to diseases of the intestines, and in 3 cases to senile decay. *Post-mortem* examinations were made in 8 cases.

The Register of Restraint and Seclusion contains 1 entry. It refers to the use of gloves for a period of 3 hours in the treatment of a patient suffering from violent epileptic excitement. No serious accident has happened to any patient. There has been 1 case of escape in which the patient was absent over night before being brought back.

The institution was found in excellent order and the condition of the patients is very satisfactory. The tranquillity which prevailed, and the absence of evidences of irritability among the patients, were indicative of judicious management and kindly treatment. One of the most important things which tend to promote the contentment of the patients, and to exercise a curative influence on their mental condition, is the provision of healthy occupation, and this is well attended to in this asylum. Among other pieces of work done by the men during the past summer, is the conversion of one of the airing courts into an excellent bowling green. The proportion of patients capable of work on the female side has been considerably diminished by the removal of patients to Hawkhead, most of whom belonged to the class of working patients. The number of women who are got to work is still, how-

ever, considerable, and in view of the nature of the cases it is creditable to the management that the number is so large. Fifty-six out of the 93 female inmates are regularly employed at present.

The books and registers were examined, and were found regularly and correctly kept.

Appendix B.
Commissioners' Entries.
Parochial Asylums.
Greenock Parochia
Asylum.

GREENOCK PAROCHIAL ASYLUM,
19th March 1895.

There are 161 men and 127 women, making a total of 288 at present on the register of the asylum. They are all resident.

The following changes have occurred since the date of last visit :—

PAUPER PATIENTS.

	M.	F.	TOTALS.
Admitted,	32	22	54
Discharged recovered,	13	12	25
Discharged unrecovered,	8	7	15
Dead,	5	5	10

The mortality has been low, and the deaths are registered as due in 6 cases to brain disease, in 1 case to pneumonia, in 1 case to heart disease, and in 2 cases to consumption. *Post-mortem* examinations were made in 4 cases.

There have been only four changes among the attendants since last visit ; three resigned, one was dismissed for intemperance, and four have been engaged.

There are 10 entries in the Register of Restraint and Seclusion, referring to the use of seclusion in the treatment of one patient. One escape is recorded in which the patient was absent for a night before being brought back. One accident has occurred—a fall which resulted in a fracture of the wrist.

All sections of the asylum were found in good order, and very clean. Progress is being made in the painting and decoration of the wards, and the work is being tastefully executed. The condition of the patients was very satisfactory. Their general health is excellent as is evidenced by the fact that there were only 7 patients, 3 males and 4 females, in bed at the time of the visit. The clothing of the inmates was good in quality, and attracted favourable attention by its neatness and tidiness. The coverings of one of the beds were tested and found to weigh 26 lbs. The patients were on the whole free from excitement and complaint.

The management of the asylum, both from a general and medical point of view is very efficient.

There are at present 49 patients, 24 men and 25 women chargeable to the landward parishes of Lanarkshire who will be transferred to the District Asylum at Hartwood when it is opened on 15th May.

Certain alterations of the fence between the asylum grounds and the railway, intended to render it unclimbable, or at least difficult to climb over, are under the consideration of the Committee. A portion of the fence with alterations which it was thought might be sufficient, was tested during the visit, but it was found not to interpose a serious obstacle to a person who was active and determined. It is hoped that the Committee will as soon as possible have such a fence erected as will be efficient.

The books and registers were examined and were found regularly and correctly kept.

GREENOCK PAROCHIAL ASYLUM
4th November 1895.

There are 140 men and 124 women on the register and resident in the asylum at present.

Since 19th March, the date of last visit, the following changes have taken place :—

PAUPER PATIENTS.

	M.	F.	TOTALS
Admitted,	36	34	70
Discharged recovered,	22	13	35
Discharged unrecovered,	26	18	44
Dead,	9	6	15

Appendix B.

Commissioners' Entries.

Parochial Asylums.

Greenock Parochial Asylum.

Of the 44 patients discharged unrecovered 38 were chargeable to Lanarkshire parishes, and were transferred to the Lanark District Asylum recently opened at Hartwood.

The deaths are registered as due to diseases of the brain in 6 cases, to disease of the heart in 1 case, to diseases of the lungs in 4 cases, to peritonitis in 1 case, and to exhaustion from chronic mania in 3 cases. *Post-mortem* examinations were made in 12 cases.

The Register of Restraint and Seclusion contains 9 entries. They all refer to the use of the strait jacket to prevent a patient from interfering with surgical dressings. No serious accident has occurred to any patient. There have been 3 cases of escape in which the patients were absent at least one night before being brought back.

The condition of the patients was found satisfactory. They were well clothed, and the dinner which was served during the visit was abundant and suitable. No complaint was made as to the way in which the patients are treated. The wards were clean, well aired, comfortably heated and in good order.

Nothing has yet been done to make the fence between the grounds and the railway sufficient to prevent patients from getting easily to the railway. In view of the fact that two cases of suicide have already occurred which a more efficient fence would have prevented, the attention of the Committee is again called to the matter.

The books and registers were examined and were found regularly and correctly kept.

Paisley Parochial Asylum, Riccartonbar.

PAISLEY PAROCHIAL ASYLUM, RICCARTONBAR,
4th March 1895.

There are 105 men and 100 women at present on the register of the asylum, or 205 in all. They are all resident.

Since the date of last visit 5th October 1894, the following changes have taken place:—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
Admitted,	7	18	25
Discharged recovered,	3	6	9
Discharged unrecovered,	7	5	12
Dead,	3	5	8

The deaths are registered as due in 4 cases, to brain disease, in 1 case to heart disease, in 1 case to bronchitis, in 1 case to senile decay, and in 1 case to asphyxia during an epileptic fit. The particulars of the death from asphyxia were fully reported to the Board, and no blame was attributed to the attendant in charge of the patient. The patient during the night vomited while in a fit, and some of the vomited matter got into the air passages. In the cases of 7 of the 8 patients who died a *post-mortem* examination was made, and the results are recorded with great care and ability.

There is no entry in the Register of Restraint and Seclusion. The number of patients who have escaped and been absent a night before being brought back is 4. Five accidents are recorded. The more serious ones were a fracture of the tibia, and the case of asphyxia already referred to. Five attendants have resigned and eight have been engaged. The extra attendants engaged are for the purpose of extending the leave of the staff.

The dayrooms and dormitories were found scrupulously clean and in excellent order. They were comfortably heated and everywhere presented a bright and cheerful appearance. The bed clothing is of good quality and ample in quantity. The coverings were tested in two cases and found to weigh 24 lbs. and 28 lbs.

The condition of the patients was most satisfactory. They were clean in person and the quality of their clothing merits commendation. Tranquillity prevailed in every section of the asylum, and there were no complaints. Their physical condition indicated that their dietary is suitable and abundant. A substantial and well cooked dinner of broth, beef and potatoes was served during the visit and relished by the patients. The mental and bodily condition of the patients is carefully studied and ably recorded. The industrial occupa-

tion of the inmates receives every attention, 156 out of a population of 205 being employed in useful and healthy work. The profit on the farm for the year ending 14th May 1894 is given as £253 14s. 4d., and the asylum dairy which yields a supply of good milk to the institution is said to have resulted in a profit of £143 4s. 11d. for the same period.

Everything seen during the visit indicated capable and energetic administration, both from a general and medical point of view.

The proposed new lavatories and water-closets appear to be satisfactory, but it is recommended that the rooms containing the water-closets should be heated by hot-water pipes and efficiently ventilated. Unless this is done there will be a flow of cold air from the water-closets to the dayrooms which will be objectionable and disagreeable.

The proposed changes in the drainage have been well considered and appear to be a suitable method of disposing of the sewage of the asylum. The land slopes on all sides from the asylum and gives every facility for the distribution of the sewage on the asylum fields.

The books and registers were examined and found to be regularly and correctly kept.

PAISLEY PAROCHIAL ASYLUM, RICCARTSBAR,
1st November 1895.

There are 103 men and 98 women on the registers of the asylum at this date. All are resident in the institution, and were seen during the visit to-day.

Since 4th March, the date of last visit, the following changes have taken place :—

	PAUPER PATIENTS.		
	M.	F.	TOTALS.
Admitted,	38	29	67
Discharged recovered,	25	13	38
Discharged unrecovered,	12	11	23
Dead,	3	7	10

One of the deaths was due to typhoid fever, contracted by the patient previous to his admission to the asylum. The disease did not spread to any of the other inmates. None of the other deaths calls for special notice. *Post-mortem* examinations were made in 8 cases.

The Register of Restraint and Seclusion contains no entry. One accident is recorded, a male patient fell and sustained a fracture of the right humerus. In 2 cases of escape, the patients were absent for one or more nights before being brought back.

The patients were found during the visit in a satisfactory condition. They were suitably clothed, and they are adequately provided with food. It was learned with cordial approval, that milk is freely given as an article of diet, when occasion requires. In addition to the regular allowance of half-a-pint of unskimmed milk to breakfast, and 2 ounces to tea on week days, with an additional three-quarters of a pint to dinner on Sundays, there is an average of more than 18 pints given daily as extra diet to patients in feeble condition. It would be difficult to overestimate the importance of abundant and suitable nourishment in the treatment of the inmates of asylums ; without it, drugs and stimulants are of little use, and with it, the need for them is greatly restricted.

The dayrooms, dormitories, and other parts of the asylum were found in good order. It is understood that certain improvements of a desirable character have been under consideration. One of these is the transference of the present male hospital ward to the females, and of the present female hospital ward to the males, and the provision of more complete bathing accommodation for each. Another is the enlargement and improvement of the dayroom at Riccartbar House, by the introduction of a large oriel window. Both of these proposals would, if carried out, constitute decided improvements, and it is understood that most of the work that they would involve, could be done by the patients.

The new waterclosets and lavatories referred to in the preceding entry, are being constructed, and they seem to be satisfactory in their arrangements. Care should, however, be taken, not to have the partitions between the water-

Appendix B
Commissioners
Entries.

Parochial
Asylums.

Paisley
Parochial
Asylum,
Riccartbar

Appendix B. closets so high as to afford facilities for suicidal attempts. All the fittings
 Commissioners' connected with the cisterns should also be considered from this point of view.
 Entries. The books and registers were examined, and were found regularly and
 correctly kept.

Lunatic Wards
 of Poorhouses.

LUNATIC WARDS OF POORHOUSES.

St Nicholas
 Poorhouse.

LUNATIC WARDS, ST NICHOLAS POORHOUSE, 16th January 1895.

There are 43 men and 48 women resident in the wards at this date.

Since 14th July, the date of last visit, 2 men and 1 woman have been discharged, and 1 woman has died. The death occurred in the case of a woman 84 years of age, and was attributed to heart disease.

The wards were found clean, comfortably heated, and well aired, and the patients seem to be adequately provided for.

The new bathroom is not yet ready for use, but it is expected to be ready sometime in the ensuing spring.

The books and registers were examined, and found regularly and correctly kept.

LUNATIC WARDS, ABERDEEN EAST POORHOUSE, [ST NICHOLAS POORHOUSE], 9th December 1895.

There are 42 men and 43 women in the wards at this date.

Since last visit, on 16th January, 5 men and 4 women have been admitted, 5 men and 7 women have been discharged, and 1 man and 2 women have died. The deaths are registered as due to scrofula and abscess in one case, and to heart disease in one case, and to bronchitis in one case. Of the 9 patients admitted, 7 were transferred from the Royal Asylum, and 2 from private dwellings. Of the 12 discharged, 2 had recovered, 7 were removed to private dwellings, and 3 were transferred to the Royal Asylum, as unsuitable for care in the wards.

There is no entry in the Register of Restraint and Seclusion, and there has been no escape or accident. One attendant has resigned, and one has been engaged.

The wards were found clean and in good order. The temperature of the rooms was very satisfactory. The patients were clean in person, and their clothing was neat and tidy in appearance, and sufficient in quantity.

Their physical condition indicated an ample and suitable dietary.

It is recommended that the patients be supplied during dinner with knives and forks, similar to those used in asylums. They will allow of the patients taking their dinner when meat is served in a cleanly and orderly manner.

The new bathroom is admirable in its arrangements, and will render the bathing of the patients comfortable and efficient.

The books and registers were examined, and were found regularly and correctly kept.

Buchan
 Poorhouse.

LUNATIC WARDS, BUCHAN POORHOUSE, 21st January 1895.

There are 25 men and 26 women at present in the wards.

Since 14th July, the date of last visit, 2 men and 1 woman have been admitted, 1 man and 1 woman have been sent back to the Aberdeen Royal Asylum, and 2 men have died.

The deaths are registered as due to cardiac disease and gastric disease.

There has been no case of escape since last visit, and no serious accident of any kind.

The wards were found in excellent order, clean, well aired, and suitably heated.

The patients are treated with great care and consideration, and the management of the institution generally is both kindly and judicious.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, BUCHAN POORHOUSE,
7th December 1895.

Appendix B.

Commissioners' Entries.

Lunatic Wards of Poorhouses.

Buchan Poorhouse.

There are 26 men and 26 women in the wards at this date.

Since last visit 2 men and 1 woman have been admitted, 1 man has been discharged, and 1 man has died. The death is registered as due to heart disease. Two of the patients admitted came from the Royal Aberdeen Asylum, and 1 from the Elgin District Asylum. The patient who was discharged was placed under care in a private dwelling.

There is, as usual, no entry in the Register of Restraint and Seclusion. There has been no escape, and no accident. Since last visit, the female attendant has resigned, and another has been engaged in her place.

The dayrooms and dormitories were found scrupulously clean, and in excellent order. The temperature of the dayrooms was satisfactory. The wards had a comfortable and cheerful appearance, and the painting and decoration which have been done since last visit have been executed with taste. The coverings on the beds are ample in quantity, and good in quality.

The patients give every evidence of being sufficiently and suitably fed, and their clothing attracted favourable notice on account of its quality and tidiness.

The visit left a very pleasing impression as to the ability and conscientiousness shown in the management of the establishment, and as to the kindly and judicious treatment of the patients.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, CUNNINGHAME POORHOUSE,
19th February 1895.

Cunninghame Poorhouse.

There are 48 men and 50 women at present in the wards. There is 1 man on probation, so that there are 49 men on the register.

Since the date of last visit, 11th October 1894, there have been 2 men and 2 women admitted, and 1 man and 1 woman have died. The causes of death were respectively apoplexy and renal disease. No *post-mortem* examination was made in either case.

There is no entry in the Register of Restraint or Seclusion and there has been one escape. One attendant has resigned and one has been engaged. No accident has occurred since last visit.

The wards were found comfortably heated either by open fires or hot water pipes. One of the male dayrooms requires reflooring, and it is recommended that pitch pine be used, as it can be waxed and polished so as to avoid wet scrubbing which tends to make the wards unhealthy. The floors of the male dormitories which were being scrubbed during the visit should be varnished and waxed.

The condition of the patients indicated good care and kind and judicious treatment. There is no irksome discipline and the patients enjoy a great amount of freedom. Thirty-nine of the men are engaged in useful and healthy work, and 39 women are fully occupied either in the laundry, kitchen or wards. It is evident that praiseworthy attention is paid to the employment of the patients.

The management is characterised by ability and energy, and fully deserves the favourable things which have been said of it in the preceding entries.

The books and registers were examined and were found regularly and correctly kept.

LUNATIC WARDS, CUNNINGHAME POORHOUSE,
11th September 1895.

There are 48 men and 49 women on the register of the wards, and all are resident in the establishment and were seen to day.

Since last visit 2 men have been admitted, 1 man has been discharged recovered, and 2 men and 1 woman have died. The deaths are registered as due to heart diseases in 2 cases, and to senile debility in one case. No *post-mortem* examination was made in either of the cases of death.

No accident has occurred, but there have been 2 instances of patients escaping and being absent for at least one night before being brought back.

Appendix B.

Commissioners' Entries.

Lunatic Wards of Poorhouses.

Cunninghame Poorhouse.

The wards were found during the visit clean, well-aired and comfortable. The patients were in a satisfactory condition ; but there are some of them who are not suited for an institution of this kind. Patients of wet or dirty habits of whom there are 3 now in the wards, cannot be properly cared for except in a fully equipped asylum. A male patient who is confined to bed by illness should also, when his condition permits, be removed to the District Asylum. The industrial occupation of the patients continues to be well attended to.

The books and registers were examined and were found regularly and correctly kept.

Dumbarton Poorhouse.

LUNATIC WARDS, DUMBARTON POORHOUSE,
7th February 1895.

There are 29 men and 31 women at present resident in the wards.

The only changes since the date of last visit are the admission of two women. There has been no discharge and no death.

There is no entry in the Register of Restraint and Seclusion, and there has been no accident and no escape.

The wards are at present in process of being repainted. The female dayroom and dormitories are finished, and the result is of a most satisfactory character. The walls of these rooms have now a warm and bright appearance, and their cheerfulness cannot fail to have a beneficial effect upon the inmates.

The patients are comfortably provided for, their clothing is good and plentiful, and the bedclothing is of good quality and ample in quantity. A satisfactory dinner of broth, potatoes, and pudding was served during the visit and enjoyed by the patients. There was no excitement and there was no complaint.

Industrial occupation of the patients continues to receive praise-worthy attention. Fifty-four out of the 60 inmates of the wards are usefully and actively employed either in the house or at outdoor work.

The management is characterised by energy and ability and fully merits the favourable comments contained in the preceding entries.

The books and registers were examined and were found regularly and correctly kept.

LUNATIC WARDS, DUMBARTON POORHOUSE,
29th June 1895.

There are 29 men and 30 women in the wards as patients at this date.

Since 7th February, the date of last visit, 1 female inmate has died, the registered cause of death being cardiac dropsy. No patient has been admitted and none discharged.

The wards were found, as usual, in excellent order, and the inmates are well provided for.

A large amount of useful and profitable work continues to be done in the institution, and a large proportion of it is done by the inmates of the lunatic wards. This is good for the patients as well as advantageous to the ratepayers.

No complaint was made by any patient during the visit, and complete tranquillity prevailed everywhere.

The books and registers were examined and were found regularly and correctly kept.

Dundee East Poorhouse.

LUNATIC WARDS, DUNDEE EAST POORHOUSE,
9th January 1895.

There are 44 men and 56 women inmates of the wards at this date.

Since 9th July the date of last visit 6 men and 6 women have been admitted, 5 men and 2 women have been discharged and 2 women have died. The deaths are registered as due to consumption and uterine disease.

There has been no accident. Two patients escaped and were absent over night before being brought back. Two attendants have resigned, and 2 have been engaged to fill their places.

The wards were found in good order, clean, comfortably heated, and well

aired. The reflooring of the main corridors has not been carried out yet. It is hoped that this will be done as soon as possible. Appendix B.

The patients are well cared for and no complaint was made by any of them. Commissioners' Entries.
The books and registers were examined and were found regularly and correctly kept. Lunatic Wards of Poorhouses.
Dundee East Poorhouse.

LUNATIC WARDS, DUNDEE EAST POORHOUSE,
8th August 1895.

There are 45 men and 56 women at present resident in the wards.

Since last visit 7 men and 6 women have been admitted, 4 men and 4 women have been discharged, and 2 men and 2 women have died. The cause of death was hemiplegia and bronchitis in 1 case, heart disease in 2 cases, and debility in 1 case. Of the 13 patients admitted 10 were transferred from the Royal Asylum, and 3 were returned from private dwellings. Of the 8 patients discharged 7 were boarded out in private dwellings and 1 man was discharged after having been absent 23 days by escape.

There is no entry in the Register of Restraint and Seclusion, and there has been no accident; 1 attendant has resigned and 1 has been engaged.

The condition of the patients was very satisfactory. Their bodily health was good and their general appearance was indicative of efficient care and of a liberal dietary. Thirty-eight men and 48 women are engaged in work which is useful and which tends to promote contentment.

A. B. is unsuitable for care in these wards. She is troublesome and violent during her excited periods and she causes excitement among the other inmates. Her removal to the Royal Asylum is recommended.

The day-rooms and dormitories were found scrupulously clean, well ventilated and in excellent order. The reflooring of the main corridor with pitch pine is in progress. The bathrooms in the wards are small and unsatisfactory, and contain only one bath each. These bathing arrangements are not sufficient for an establishment containing a hundred patients. It must take an inconveniently long time to bathe all the patients. It is recommended that the bathrooms be enlarged, and 2 baths placed in each. These improvements would enable the patients to be satisfactorily bathed without occupying too much time.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, DUNDEE WEST POORHOUSE, Dundee West Poorhouse.
10th January 1895.

There are 40 men and 38 women inmates of the wards at this date.

Since last visit 8 men and 3 women have been admitted, 1 woman has been discharged recovered, 4 men and 1 woman have been discharged unrecovered, and 1 man has died. The cause of death was locomotor ataxia.

No accident has occurred to any patient, and there has been no case of escape.

The patients were found in a satisfactory condition, and there was no manifestation of excitement. No complaint was made.

The wards were in excellent order, they were comfortably heated and well aired. The addition to the female side has made good progress.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, DUNDEE WEST POORHOUSE,
8th August 1895.

There are 41 men and 39 women at present on the register of the establishment. Two women are absent on pass, so that there are 78 patients resident in the wards at this date.

Since last visit 6 men and 8 women have been admitted, 4 men and 3 women have been discharged, and 1 man and 4 women have died. The cause of death was paraplegia in 1 case, acute pulmonary diseases in 2 cases, and heart diseases in 2 cases. Of the 14 patients admitted 10 were transferred from the Royal Asylum, and 4 were returned from private dwellings. Of the 7 patients discharged 1 was transferred to the Royal Asylum, and 6 were boarded out in private dwellings.

Appendix B. There have been no accidents or escapes, and there is no entry in the Register of Restraint or Seclusion.

Commissioners' Entries. The condition of the patients as to cleanliness and clothing was satisfactory, and their physical health and condition were indicative of a sufficient dietary.

Lunatic Wards of Poorhouses. The dinner at the time of the visit consisted of broth, beef and bread. There was no excitement, and the patients were free from complaint. Their industrial occupation receives every attention, 29 men and 27 women being usefully employed.

Dundee West Poorhouse. The wards were found clean, well ventilated and in excellent order. The new dormitory on the female side, which has been formed by the recent addition, is very satisfactory, and the new bathroom, lavatory and water-closets are improvements of a desirable kind. It is recommended that a shelter be erected at one of the walls of the female airing court, similar to the one on the male side. It would be advantageous to the patients in many ways.

The books and registers were examined, and were found regularly and correctly kept.

Edinburgh Poorhouse.

LUNATIC WARDS, EDINBURGH POORHOUSE,
13th May 1895.

There are 37 men and 40 women resident as patients in the wards.

Since last visit 5 men and 5 women have been admitted, 6 men and 4 women have been removed from the wards, and 1 man has died. The death was due to cerebral hæmorrhage.

The patients in so far as they are suitable for these wards are well provided for. Attention is however again called to the presence of unsuitable patients. Neither the kind of accommodation provided, nor the staff of attendants are adapted for the case of violent patients or those who require special attention from ill health or from wet or dirty habits. W. R., I. P., and M. M'K. are unfit for the wards on account of their degraded habits, and there are others with similar tendencies whose cases should be considered by the medical officer. D. B. is unfit for the wards on account of his violent conduct. At the time of the visit a helpless patient C. B. S. was suffering from a severe bruise of the eye due to his having been struck with a boot by B. Doubts may be entertained as to B's insanity and the necessity for sending him to an asylum; but if he is not insane he should be transferred to the ordinary wards where he will be under discipline; and if he is insane he should be in a fully equipped asylum where his violence can be controlled.

Due attention is given to the industrial occupation of the patients. Eighteen men were to day engaged in garden work, 2 were working as joiners, 1 acted as a messenger, and 4 were doing household work in the wards. Four of the women work in the kitchen and 4 in the laundry; 8 sew and 4 knit. Three assist in the household work of the wards.

The dayrooms and dormitories were found in good order.

The books and registers were examined and were found regularly and correctly kept.

LUNATIC WARDS, EDINBURGH POORHOUSE,
29th July 1895.

There are 37 men and 37 women resident in the wards at this date.

Since the date of last visit, 2 men and 2 women have been admitted. Two men and 4 women have been discharged, and 1 woman has died. The cause of death was senile debility. Of the 4 patients admitted, 3 were transferred from the Royal Edinburgh Asylum, and 1 from a private dwelling, and of the 6 discharged, 3 were transferred to the Royal Edinburgh Asylum, 3 were boarded out in private dwellings, and 1 was certified as recovered and removed to the ordinary wards.

There have been no accidents or escapes.

One attendant has been engaged.

The wards were clean and in good order. All the beds have been supplied with spring mattresses, which is a great improvement.

The patients were in good physical condition, and none was confined to bed. They were free from excitement, and no reasonable complaints were made. Twenty-five men and 25 women are usefully employed in work which

is beneficial to them. Twenty-eight men and 28 women attend Sunday services. Appendix B.

The books and registers were examined, and were found regularly and correctly kept. Commissioners' Entries.

LUNATIC WARDS, HAMILTON POORHOUSE,
6th February 1895.

Lunatic Wards
of Poorhouses.

Hamilton
Poorhouse.

There are 13 men and 18 women at present resident in the wards.

Since the date of last visit, 2 women have been admitted, 1 man has been discharged unrecovered, and 2 women have died. The deaths are registered as due to senile decay, and to hemiplegia with dropsy. No *post-mortem* examination was made in either case.

There has been no accident and no escape. There is no entry in the Register of Restraint and Seclusion.

The male attendant who was in charge at date of last visit resigned, and the attendant who is now on duty, was formerly in the service of the establishment for 18 months. The female attendant is about to be discharged.

The condition of the wards was highly satisfactory. They were clean, in good order, and comfortable as to warmth. The bed-clothing was found to be satisfactory in quantity and quality, but the pillows and bolsters were insufficiently filled. Their bulk should be increased, so as to afford a proper rest for the head.

The lavatories on the male side require renewal, and the basins are too few for the number of inmates. It is recommended that they should be improved in a manner similar to that which has been effected on the female side.

The condition of the patients was indicative of good care and of judicious treatment. All who were capable of employment were actively engaged in useful work. The management of the establishment left a very favourable impression.

The books and registers were examined and found to be correctly kept.

LUNATIC WARDS, HAMILTON POORHOUSE,
28th June 1895.

There are 13 men and 18 women on the register of the institution, and all are resident in the wards, and were seen at the visit to day, except 1 man who is absent on probation.

Since last visit, 2 women have been admitted, 1 has been removed to Kirklands Asylum, and 1 has died. The death occurred in the case of a woman 74 years of age, and is registered as due to syncope. A *post-mortem* examination was made.

The patients now in the wards seem all to be suitable for treatment in this institution, except A. K. who is suffering from dropsy, and will soon require hospital treatment, which cannot be given except in a fully equipped asylum. His removal to an asylum should therefore be carried out at an early date. The rest of the inmates are well provided for, and they are kindly and judiciously treated.

The wards were found in excellent order. The pillows and bolsters referred to in the preceding entry as insufficiently filled, have been increased in size by an additional quantity of hair, and the lavatory on the male side has been refitted, and made more complete.

It is recommended that knives and forks should be supplied for use at dinner, so as to encourage the practice of orderly habits.

The industrial occupation of those patients who are able to work, continues to receive due attention.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, INVERESK POORHOUSE,
20th April 1895.

Inveresk
Poorhouse.

There are 16 men and 16 women in the wards, as patients, at this date.

Since last visit 1 man and 2 women have been admitted, and 1 man, whom it was found necessary to remove to the District Asylum, has been discharged. There has been no death.

Commissioners' Entries.

Lunatic Wards of Poorhouses.

Inveresk Poorhouse.

The wards continue to be admirably managed. The rooms were found everywhere beautifully clean and very comfortable. The inmates are in a satisfactory condition, and the tranquillity and contentment which they show is good evidence that they are liberally and kindly treated.

The clothing, both of men and women, is comfortable and in good order, and their food is of good quality and abundant.

The industrial occupation of the patients is well attended to, with results which are both beneficial to the patients and advantageous to the ratepayers.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, INVERESK POORHOUSE,
2nd July 1895.

There are 16 men and 15 women at present in the wards.

Since last visit 1 woman has been discharged. There have been no admissions and no death.

The inmates bore every evidence of being well cared for. Their physical condition was very satisfactory, and indicated a suitable and liberal dietary.

They were comfortably and neatly clothed, and their personal cleanliness is well attended to. Their aspects indicated abundant exercise in the open air. Thirteen men and 10 women are employed in healthy and useful work.

The wards were found in excellent order, very clean and comfortably furnished, and every thing that was seen reflected very creditably on the management of the establishment.

The books and registers were examined, and were found regularly and correctly kept.

Kincardine Poorhouse.

LUNATIC WARDS, KINCARDINE POORHOUSE,
10th May 1895.

There are 40 patients in the wards at present, 21 men and 19 women. Since last visit 1 man and 3 women have died. The deaths were due in 2 cases to heart disease, and in 2 cases to pulmonary disease.

The inmates of these wards are very well provided for. They are comfortably clothed, adequately fed, and in every way kindly treated. The importance of keeping those who are able for it, in regular and healthy occupation is duly recognised.

Most of the men are employed at garden or field work, and some are engaged in preparing firewood. The women are employed in the kitchen and laundry, at the household work of the wards, or at sewing or knitting. Six men and 7 women are unemployed on account of bodily or mental incapacity.

The wards were found in excellent order, and presented a cheerful and comfortable appearance.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, KINCARDINE POORHOUSE,
28th August 1895.

There are 21 men and 18 women resident in the wards at this date.

Since 10th May 1895, the date of last visit, 1 man has been admitted, 1 man has been discharged unrecovered, and 1 woman has died. The cause of death was heart disease.

The patients were found clean in person, and in good health and physical condition, except 3 who are confined to bed from chronic ailments.

The clothing attracted favourable attention, it was of good quality, ample in quantity, and neat in appearance.

A well cooked dinner was served in an orderly manner during the visit; every patient capable of work is industriously employed. There has been no accident, and no escape.

The wards were found scrupulously clean, and in excellent order, but it is recommended that the enlargement of the day-rooms be early considered by the Committee, as their extension is necessary in the interests of the patients.

The establishment is managed with ability, and the patients are kindly treated and well cared for.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, LINLITHGOW POORHOUSE,
30th May 1895.

Appendix B.

Commissioners'
Entries.Lunatic Wards
of Poorhouses.Linlithgow
Poorhouse.

There are 16 men and 16 women at present in the wards.

Since last visit 4 patients have been admitted, 3 have been discharged, and there has been 1 death. The cause of death was senile exhaustion. There have been 2 escapes in which the patients were absent over night before being brought back. No accident is recorded.

The condition of the patients was in every way satisfactory, and they are kindly and judiciously treated. Their clothing attracted favourable notice, it was tidy, comfortable and pleasing in appearance. The stock of clothing is kept in a very orderly manner. All the patients are, with few exceptions, usefully employed. The wards were found in excellent order. The water-closets on the female side have been renewed, and it is recommended that the same improvement be carried out on the male side, as the present closets are not satisfactory.

The books and registers were examined, and found to be regularly and correctly kept.

LUNATIC WARDS, LINLITHGOW POORHOUSE,
16th December 1895.

There are 16 men and 16 women in the wards as patients at this date, no bed being vacant.

There has been no patient admitted since last visit, and no patient removed, either by discharge or death.

There has been no accident to any patient, and no escape.

The patients were found in a very satisfactory condition. They were all in good health, except one woman who was confined to bed by a slight illness.

The clothing of the patients deserves to be mentioned with commendation. It is, as it ought to be, such as is usually worn by working people, and has nothing of an institutional character. It tends to preserve their self-respect, and to influence their conduct beneficially when there is nothing in their appearance to suggest that they are different from other people. An illustration of the consideration that is given to this view is seen in the variety of the outdoor clothing of the women.

There was no manifestation of discontent, and it was pleasing to observe frequent evidence of mutually kindly feeling between the patient and those in charge of them.

The wards were everywhere in excellent order, clean, comfortably heated, and well aired.

The water-closets on the male side, referred to in preceding entry, are to be reconstructed and rearranged.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, OLDMACHAR POORHOUSE,
21st January 1895.Old Machar
Poorhouse.

There are 27 men and 29 women in the wards at present.

Since last visit 1 man and 4 women have been admitted, 1 man and 4 women have been discharged, and 2 women have died. The deaths are registered as due to congestion of the lungs in both cases.

One attendant has resigned and 1 has been engaged.

No accident has taken place, and there has been no case of escape.

The patients were found in a satisfactory condition, and none made any complaint as to their treatment.

The wards were in good order, clean, well aired, and suitably heated.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, ABERDEEN WEST POORHOUSE,
[OLD MACHAR POORHOUSE], 9th December 1895.

There are 26 men and 25 women in the wards at this date.

Since last visit 4 men and 5 women have been admitted, 5 men and 8 women

Appendix B.
Commissioners' Entries.

Lunatic Wards of Poorhouses.

Old Machar Poorhouse.

have been discharged, and 1 woman has died. The death is registered as due to influenza and bronchitis. Of the 9 patients admitted, 2 were transferred from the Royal Asylum, 1 from the Govan Parochial Asylum, and 6 were returned from private dwellings. Of the 13 patients discharged, 3 had recovered, 2 were transferred to the Royal Asylum as unsuitable for care in the wards, 7 were removed to private dwellings, and 1 had escaped. There is no anxiety as to the safety of the male patient who escaped on the 26th July. He made his escape on a previous occasion, and supported himself for many years before again requiring institutional care.

There are 2 patients, G. H. and R. D. M. who, on account of their mental and bodily condition, are unsuitable for care and treatment in the wards. Their removal to the asylum is recommended.

There is no entry in the Register of Restraint and Seclusion, and no accident is recorded.

The physical condition of the patients is satisfactory, and indicative of a good and suitable dietary. The dayrooms were comfortably heated. The beds are without pillows, and as the bolsters do not afford a proper support and rest to the head, it is recommended that a pillow be furnished to each bed.

It is recommended that the patients be supplied during dinner with knives and forks, similar to those used in asylums. These are necessary in order to enable the patients to eat their dinner in a cleanly and orderly manner when meat is served.

The books and registers were examined, and found to be regularly and correctly kept.

Old Monkland Poorhouse.

LUNATIC WARDS, OLD MONKLAND POORHOUSE,
18th February 1895.

There are 22 men and 25 women at present in the wards. There are 2 men absent on probation so that there are 24 men on the register.

Since 4th October 1894, the date of last visit, 2 men have been admitted, and 1 man and 2 women have been discharged. There has been no death. The 3 patients discharged were returned to asylums as they were unsuitable for treatment in the wards.

There is no entry in the Register of Restraint and Seclusion, and there has been no accident. One patient escaped on two occasions, and he has therefore been returned to an asylum. Two attendants have resigned and 2 have been engaged.

All parts of the wards were found in excellent order, and their condition as to warmth was very satisfactory. Good fires were found not only in the day-rooms, but also in the dormitories.

The patients bore every evidence of satisfactory care. There was no excitement, and no complaints were made.

A satisfactory dinner of broth, beef and bread, was served in a very orderly manner during the visit, and enjoyed by the patients. The broth was pleasant to taste, and abundant in quantity.

Seventeen men were found engaged in sawing and carrying wood, and all the women who are capable of employment are engaged in useful work. The laundry work is at present in abeyance, on account of frozen pipes.

The management of the wards continues to be of a satisfactory character, and the visit left a favourable impression.

The books and registers were examined, and found regularly and accurately kept.

LUNATIC WARDS, OLD MONKLAND POORHOUSE,
27th June 1895.

There are 24 men and 25 women on the register of these wards at present, and all are resident, and were seen at the visit to-day.

Since 18th February, the date of last visit, 5 men and 2 women have been admitted, 2 men have been discharged unrecovered, and 3 men and 2 women have died.

The causes of death are registered in 2 cases as debility, and as softening of the brain, phthisis, and dropsy, each in 1 case. No *post-mortem* examination was made in any of the cases.

No change has taken place in the staff of attendants.

There has been no accident, and no case of escape.

The wards were found in excellent order, both on the male and on the female side. They were everywhere well aired, clean, and comfortable, and the bedding and other furniture was clean and tidy.

The patients are well provided for. They have abundance of good food, and the meals are served in a very seemly and orderly manner. They are suitably clothed, and the clothing of the women attracted special attention by its excellence and smartness.

The industrial occupation of those who are able to work is well attended to.

The books and registers were examined, and were found neatly, regularly and correctly kept.

Appendix B.

Commissioners' Entries.

Lunatic Wards of Poorhouses.

Old Monkland Poorhouse.

LUNATIC WARDS, PERTH POORHOUSE,
4th April 1895.

Perth Poorhouse.

There are 20 men and 20 women at present resident in the wards.

Since last visit 4 women have been admitted, 2 women have been discharged, and 1 woman has died. The cause of death was bronchitis. Three of the women admitted were chargeable to Govan. The 2 women discharged have been placed under care in a private dwelling.

The wards have a comfortable and well furnished appearance, and were found in excellent order. The beds and bed clothing are very satisfactory, the coverings of one of the beds weighed 26lbs. The patients are in good physical health and condition, and their clothing is of good quality, and neat and tidy in appearance. The dinner was served in an orderly manner during the visit, and consisted of potato soup, bread and pudding. It was well-cooked and pleasant to the taste. The stores were examined, and found to be of good quality. The bathing arrangements appear to be safe and comfortable for the patients.

Great attention is paid to the occupation of the inmates; 18 men and 15 women are daily employed in useful work. The women who work in the laundry are provided with good, thick, waterproof aprons.

The wards are managed with energy and intelligence.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, PERTH POORHOUSE,
25th October 1895.

There are 20 men and 19 women at present in the wards.

Since 4th April 1895, the date of last visit, no change has taken place except the discharge of a female, who was transferred to the District Asylum.

There has been no accident, and no escape.

The wards were found in excellent order, being in good repair, clean, well-aired and comfortable.

The patients are well cared for, and judiciously managed. There was no sign of discontent among them, and this is properly regarded as due in a great measure to the successful way in which they are kept engaged in useful occupation.

The books and registers were examined, and were found regularly and correctly kept.

LUNATIC WARDS, WIGTOWN POORHOUSE,
10th April 1895.

Wigtown Poorhouse.

There are 14 men and 12 women at present in the wards.

The only change since last visit is the admission of 1 female. There have been no accidents or escapes. A female attendant has been dismissed, and 1 has been engaged.

The patients were found in a very satisfactory condition in regard to their physical health, cleanliness and clothing. Eleven out of the 14 men, and all the women are usefully employed, the men chiefly in active outdoor work, and the women in the work of the kitchen or laundry or at sewing. The patients are evidently treated with much kindness and consideration.

The wards were found in good order. It is understood that the male dormitory is to be repapered this spring, and that the stair leading to the apartment, which is now much worn, and on that account unsafe, is to be thoroughly

Appendix B.

Commissioners' Entries.

Lunatic Wards of Poorhouses.

Wigtown Poorhouse.

repaired. The urinals are in a very unsatisfactory condition, and it is recommended that a w.c. be substituted for them. The recommendation as to comfortable arm-chairs for old and infirm patients mentioned in the last entry is here repeated.

The books and registers were examined, and found to be regularly and correctly kept.

LUNATIC WARDS, WIGTOWN POORHOUSE,
13th November 1895.

There are 13 men and 12 women resident as patients in the wards at this date.

Since last visit 1 male patient has been transferred to the asylum at Dumfries. No patient has been admitted, and there has been no death.

The Register of Restraint and Seclusion contains 1 entry. It refers to the seclusion of a male patient on account of dangerous excitement. Being unsuitable for treatment in the wards he was removed, and is the patient above referred to as having been sent to Dumfries. No accident of a serious character has happened among the patients, and in the only case of escape the patient was brought back the same day.

The wards were found clean, well aired, and in good order. The recommendation, which has been made in preceding entries, that one or two chairs should be provided for the male dayroom more suitable for feeble and infirm patients, is here repeated.

The patients continue to be employed in useful work so far as their condition renders them fit, only 2 men and 1 woman being without occupation.

With the exception of the Medical Casebook, the books and registers are regularly kept and up to date.

Institutions for Imbeciles.

Baldovan Institution.

INSTITUTIONS FOR IMBECILE CHILDREN.

BALDOVAN INSTITUTION,
9th January 1895.

There are at present 45 boys and 27 girls, as pupils, in the institution. One boy and 2 girls are private pupils; the rest are chargeable to parochial boards.

Since 28th June, the date of last visit, 1 boy and 2 girls have been received as private pupils, and 4 boys and 6 girls have been placed in the institution by parochial boards, 3 boys and 2 girls have been discharged, and 4 boys and 1 girl have died.

The deaths were due to phthisis, tubercular meningitis, tubercular enteritis, gastric catarrh, and pertussis.

An epidemic of whooping cough has recently visited the institution, and has been a cause of considerable anxiety. A large number of the children were attacked, but nearly all have now recovered, only 1 case having proved fatal. The nursing necessarily entailed much work on the part of the staff.

The ordinary work of the institution is now going on very satisfactorily. The appointment of a lady, as superintendent, has proved a great success. Miss Butler is well qualified for the performance of her duties, and she is greatly interested in them. The children are treated with much care and kindness; and the education of those who are educable is carried on in a very efficient manner.

The plans for the proposed additions to the buildings have been prepared, and it is expected that the work will be commenced early in the spring. The arrangements have been well considered, and the additions will add greatly to the efficiency of the institution both in facilitating the work of education, and in adding to the comfort of the children. The want of a sickroom such as forms part of the proposed addition was much felt during the recent epidemic.

The books and registers were examined, and were found correctly kept.

BALDOVAN INSTITUTION, Appendix B.
9th August 1895.Commissioners'
Entries.Institutions
for Imbeciles.Baldovan
Institution.

There are 51 boys and 27 girls in the institution at this date. One of the boys and 2 of the girls are private pupils, and 75 are maintained by parish councils.

Since the date of last visit, 9th January 1895, 10 boys and 2 girls have been admitted, and 4 boys and 2 girls have died. No removals have taken place. There is an increase of 6 pupils since last visit. The deaths were due to meningitis in 1 case, to amyloid disease of the liver in 1 case, and to various forms of tuberculosis in 4 cases.

Every department of the institution was found scrupulously clean and in excellent order. The rooms have a comfortable and cheerful appearance, and the beds were most satisfactory.

The clothing of the children was clean and tidy. Great taste is shown in selecting the material, and in the manner in which the clothing is made. The physical condition of the children is, on the whole, good—there was only one child in bed at the time of the visit.

The children had a happy and cheerful appearance, and they are evidently well cared for and kindly treated. Eighteen children regularly attend a church in the neighbourhood. The dinner was served in a very orderly manner, and the table equipage has recently been much improved.

The training of the children in the school and in industrial employment is carried on with efficiency and success. Every child who is mentally and physically capable of useful employment is engaged in some household or outdoor work.

The superintendent, Miss Butter, fully recognises the advantages of industrial training, and spares no pains in developing the capabilities of the pupils. This training is most beneficial as it enables the children to be useful members of a household when they return to their homes, and may lead to their becoming either partially or wholly self-supporting.

Everything seen, during the visit, reflected most creditably on the management of the institution by Miss Butter, who is deeply interested in her duties.

Satisfactory progress is being made with the new buildings. The schoolroom is, at present, overcrowded, and the demand for increased accommodation is therefore urgent.

The books and registers were examined, and were found correctly kept.

LARBERT INSTITUTION, Larbert
30th March 1895. Institution.

There are, at this date, 240 children in the institution. Of these, 22 boys and 9 girls are private pupils, 53 boys and 34 girls are elected pupils, and 84 boys and 38 girls are paid for by parochial boards.

Since the 8th of October 1894, the date of last visit, 17 pupils have been admitted, 7 have been discharged, and 12 have died. The deaths were due, in 3 cases to brain disease, in 3 cases to epilepsy, in 2 cases to pneumonia, and in 1 case each to tuberculosis, thrombosis, septicæmia, and measles.

The institution was everywhere found scrupulously clean and in good order. The dormitories were neat and comfortable, and the beds very satisfactory. The children were seen at school, in the dayrooms, and at dinner. Their clothing deserves the highest commendation; it was clean, tasteful and very pleasing in appearance, and it was evident that the excellence of their clothing not only afforded the children pleasure, but that it also had a beneficial influence on their habits. No child was seen making any attempt to destroy its clothing, a tendency which is common among imbeciles. It was a pleasure to see them at school, and to witness the training which is given them. All the children appeared happy and cheerful, and to enjoy the various means adopted to develop their capacities. The dinner was served in a most orderly manner, and the good behaviour of the children during dinner was remarkable. Each child is taught to take its food in a clean and orderly way, and the results of this training are very gratifying.

The administration of the institution is very efficient, and in every department it bore evidence of Mr Skene's vigilance, earnestness, and capacity.

Industrial occupation of the children must, when their ages and deficient

Appendix B.
 Commissioners' Entries.
 Institutions for Imbeciles.
 Larbert Institution.

intelligence are considered, be limited, but the kind of training which develops industrial capability is properly regarded as one of the most important functions of the institution, and should be developed as far as possible. There are 4 boys learning tailoring, 4 girls in the laundry, and 4 girls in the kitchen. There are 122 pauper children in the institution, and if those of them who are capable of learning an occupation were taught one which would render them either partially or wholly self-supporting when they left the institution, a great benefit would be bestowed upon the imbeciles themselves, and upon the parishes to which they are chargeable.

There is, at present, an epidemic of measles in the institution. There have been 32 cases up to this date, one of which proved fatal from the supervention of bronchitis. This epidemic has overtaxed the hospital resources of the institution. The separate hospital contains, at present, 10 cases, and there are 4 cases in a room in the main building. All the cases are, at present, progressing favourably.

The sickroom accommodation appears to be inadequate for the present requirements of the institution, but this can be remedied by putting beds into an adjoining room now used as a nursery.

Progress is now being made with the building of the Superintendent's house, which had been much hindered by the severe winter. It is hoped that the building of this house will be pushed forward with all possible speed, and every preparation should be made for the alterations in the front block. When these alterations are completed relief to the present crowded condition of the sitting-rooms in this section will be obtained, and accommodation of a suitable kind will be provided for those pupils for whom a high rate of board is paid.

The books and registers were examined, and were found regularly and correctly kept.

LARBERT INSTITUTION, 29th July 1895.

There are 253 pupils at present on the register of the institution,—169 boys and 84 girls. Of these 26 boys and 7 girls are private pupils, 58 boys and 38 girls are maintained free by the institution, and 85 boys and 39 girls are paid for by parish councils. Ten boys and 9 girls included in these numbers are at present on holiday at their homes.

Since last visit the following changes have taken place:—4 boys and 1 girl have been admitted as private pupils, 15 boys and 8 girls have been admitted on election by the subscribers, and 5 boys and 4 girls have been placed in the institution by parochial authorities. Eight boys and 5 girls have left the institution, and 6 boys and 5 girls have died.

Of the 13 pupils who have left the institution, all except 2 epileptics are described as having derived great benefit from the training they received.

The deaths are registered as due to epilepsy in 2 cases, to bronchitis in 1 case, to diarrhoea in 1 case, to tubercular diseases in 4 cases, and to the results of measles in 3 cases.

The present condition of the children in regard to health is good. There is now no epidemic disease and only 3 children are confined to bed.

The impression produced by the visit to day was very satisfactory. There was abundant evidence that the institution is made to fulfil its purpose in a way which reflects credit on the Directors and on Mr Skene and his staff.

The food of the children is of good quality, well cooked and neatly served, and well adapted to their requirements. Their clothing is suitable and at the same time smart; and all that concerns their personal comfort receives careful attention. Perfect cleanliness and admirable order was found throughout the institution.

The general and the school training of the pupils continues to be efficiently conducted. Two classes were seen at gymnastic drill of a kind well suited to develop the physical vigour of the pupils and their capacity for useful action. They went through their exercises in a way which gave evidence of careful teaching. This kind of training is of great importance to the children not only for its direct influence on their bodily health and efficiency, but also for its beneficial, though less direct effect on their mental condition. It is carried on with energy and skill, though under considerable difficulty from the want of a large hall where a considerable number of the children could be drilled together. The erection of a hall of this kind has been often recommended in preceding

entries, and it is hoped that before long the Directors will see their way to provide it. It is recommended, as a desirable adjunct to the gymnastic exercises, and as beneficial in other ways that a few of the pupils with musical capacity should be formed into an instrumental band. This has been done with great success and has been found very useful in other institutions for the training of imbeciles.

The alterations in the front block of building, which formerly gave accommodation both to the Superintendent's family and to the higher class of private pupils, are now being carried out; and good progress has been made with the work. The whole block will, under the new arrangements, be devoted to the private pupils, who will then be provided for in a very satisfactory manner, the Superintendent being provided for in a new house which is rapidly approaching completion. It is understood with much approval that the Directors have resolved to put neat tiled dados in the new dining-room of the house for private pupils, and also in the lavatories and water-closets. It was observed that the well in the new staircase of that house will be a source of danger unless some means is adopted to prevent children from falling from the upper stages. It is recommended that wire flower trays should be fixed on brackets projecting into the wall and so disposed as to obviate this danger.

The ground in front of the hospital ward, formerly the Superintendent's garden, is now covered with green sward, and is used as a play ground for the younger children. This is a very useful improvement.

The books and registers were examined and were found regularly and correctly kept.

Appendix B.
Commissioners' Entries.
Institutions for Imbeciles.
Larbert Institution.

LUNATIC DEPARTMENT OF H.M. GENERAL PRISON.

H.M. General Prison, Perth.

PERTH, 20th April 1895.

To the Secretary of the General Board of Lunacy.

SIR,—I have to report that I to-day visited the Lunatic Department of the Perth General Prison.

There are 40 men and 20 women in the department at this date.

Since last visit 3 men and 4 women have been admitted, and 1 man has been discharged.

Two inmates were found in seclusion on account of temporary excitement.

The condition of the inmates and of the wards was very satisfactory, and the management is evidently characterised by ability and success. To-day being Saturday, the men were not seen at work, but it is reported that 17 or 18 work in the garden and 2 or 3 in the workshop. The men were seen at dinner, which consisted of broth, meat, potatoes and bread; the meal was ample in quantity and well cooked. The wards for the women are bright and cheerful, and the majority of the inmates were found usefully employed.

PERTH, 25th October 1895.

To the Secretary of the General Board of Lunacy.

SIR,—I visited the Lunatic Department of H.M. General Prison here to-day. There are at present 39 men and 17 women inmates of the Department. Since last visit 4 men have been admitted, 4 men and 3 women have been discharged, and 1 man has died.

Every section of the Department was found in good order, and the condition of the inmates showed that they are judiciously treated.

Everything that was seen gave evidence that the establishment is well managed.

Appendix C.

APPENDIX C.

Reports on
Patients in
Private
Dwellings.

GENERAL REPORTS ON THE CONDITION OF PATIENTS
IN PRIVATE DWELLINGS.

Report by Dr
J. F. Suther-
land.

REPORT BY DR J. F. SUTHERLAND.

I beg to submit the following report and accompanying statistical tables, bearing upon the work accomplished by me during 1895, in the visitation of the private and pauper insane residing in private dwellings and specially licensed houses in 17 entire counties and in part of 2 counties.

TABLE I.

Showing the Number of Patients Visited and Reported on in 1895.

Counties Visited.	Parishes Visited.	Private and Curatory Patients.			Pauper Lunatics.									Number of Patients Visited.
					Single Patients.			In Specially Licensed Houses.						
								M.	F.	T.	M.	F.	T.		M.	F.	T.
1. Argyll, . . .	30	...	5	5	61	55	116	21	17	38	159			
2. Banff, . . .	17	2	1	3	23	41	64	...	3	3	70			
3. Berwick, . . .	9	1	2	3	7	14	21	1	4	5	29			
4. Clackmannan, . . .	4	1	...	1	1	5	6	...	...	...	7
5. Dumbarton, . . .	4	4	6	10	3	3	6	1	...	1	17			
6. Dumfries, . . .	17	1	3	4	14	10	24	...	...	...	28
7. Edinburgh, . . .	23	23	49	72	30	51	81	3	22	25	178			
8. Elgin, . . .	16	6	5	11	12	21	33	5	6	11	55			
9. Forfar, . . .	23	3	6	9	25	40	65	7	19	26	100			
10. Haddington, . . .	13	1	4	5	10	11	21	1	2	3	29			
11. Inverness, . . .	4	...	...	...	7	6	13	...	...	...	13
12. Lanark, . . .	22	8	9	17	42	65	107	23	51	74	198			
13. Nairn, . . .	4	2	...	2	3	9	12	...	...	...	14
14. Peebles, . . .	5	2	2	4	1	2	3	...	...	...	7
15. Renfrew, . . .	14	4	12	16	4	17	21	...	2	2	39			
16. Ross (Wester), . . .	8	1	...	1	24	22	46	1	...	1	48			
17. Roxburgh, . . .	7	...	10	10	11	10	21	1	5	6	37			
18. Selkirk, . . .	3	...	1	1	1	7	8	...	...	...	9
19. Stirling, . . .	17	5	11	16	13	13	26	51	85	136	178			
20. Western Isles, } Skye & Outer } Hebrides . . . }	16	2	...	2	59	71	130	...	...	...	132
Totals, . . .	256	66	126	192	351	473	824	115	216	331	1347			

As indicated in the above Table, in all 1347 persons, of whom 1155 were pauper patients were seen, and reports having reference to the position, guardianship, conduct and bearing, and the mental and physical condition of each, were furnished to the Board shortly thereafter. The ratio of males to females among the pauper insane placed singly was as 100 to 134, among those in licensed

houses receiving from two to four as 100 to 187, and among both as 100 to 150, —a ratio much higher than that of asylums in which, on 1st January 1895, it stood at 100 to 106. The difference between the sex ratio in asylums and private dwellings is no doubt owing mainly to the fact that female patients enter naturally into domestic life and work, and can thus be more easily provided for in private dwellings than males.

Appendix C.

Reports on
Patients in
Private
Dwellings.Report by Dr
J. F. Sutherland.

PAUPER PATIENTS.

General Observations.

I had not long entered upon my duties before I became satisfied that, with relatively few exceptions, the pauper patients under private care were in all respects most suitably provided for in regard to accommodation, environments, guardianship, food, clothing, and supervision, and at the close of the year, after an inspection of 1155 patients, the views at first impressed on my mind, in regard to this method of disposing of 23 per cent. of the insane poor in Scotland, were deepened and confirmed.

That the system secures to the insane a degree of liberty, which most of them fully appreciate, is apparent on every side. The patients reside in comfortable dwellings, which have received the approval of the Board, after certain requirements have been complied with to their satisfaction. On the whole, the respectability of the guardian, related or unrelated, is likewise assured. Cases of disappointment there will always be, but they are rare. In the counties I have inspected, the patient's social position is, as a rule, on a par with that of his guardian. He virtually becomes one of the family circle, and is, as a rule, treated with equal consideration. He has got, so to speak, the run of the house and the table, and participates in all that goes to make up life in a village or rustic dwelling.

Not only does the private dwelling thus secure to patients considerable freedom, happiness, and contentment, but it provides outlets for work of every description—light and heavy, indoor and outdoor—suitable to the physical and mental capacity of each. Work, it is needless to say, is of the first importance in incurable as well as curable cases of both sexes. The women knit, sew, darn, scrub, and even nurse with real attachment and assiduity. The presence of a baby in the family has, in many cases, a humanising influence upon the patients. The men find outlets for their energies at such occupations as wood-chopping, gardening, field-work, and in byres and stables, and in all their vocations they are individually encouraged and supervised. Under such an arrangement their individuality is preserved, and whatever potential energy or possibilities they possess is certain to be developed and utilised.

The system of boarding patients in private dwellings, moreover, carries with it considerable pecuniary advantages. It saves the ratepayers in the parishes to which the patients belong not only the entire cost of building for them, but also a considerable part of the yearly outlay which would be necessary to maintain them in asylums; and it is further a source of profit to the communities among which the patients are placed. Upon each lunatic boarded-out something like £14 to £18 is spent annually by the parishes to which they are chargeable, and in every instance this sum allows a margin of profit—larger, of course, when 2, 3, or 4 are kept—to all guardians, including those whose means of subsistence, sometimes slender, is thereby supplemented, and this is specially so in the case of female guardians who, without this aid, might themselves have to fall back upon public relief.

The supervision exercised over the patients is, to my mind, one of the most satisfactory and outstanding features of the system. The local doctor visits each patient four times a year, the Inspector of Poor twice and oftener, sometimes accompanied by a member or members of the Parish Council, and the Deputy Commissioner once a year to all and twice or thrice to the aggregations in Fife, Stirling, Perth, Lanark, &c. There is thus that local and central supervision which affords adequate guarantee that full justice is done to patients. But in addition to official inspection, the system is open to the inspection of the public, and this unofficial surveillance cannot be over estimated. Friends visit when they have a mind to, and so do neighbours and the local clergymen and philanthropic individuals.

Appendix C.

Classification of Mental Diseases.

Reports on
Patients in
Private
Dwellings.

Report by Dr
J. F. Suther-
land.

Of the insane poor visited by me, numbering 1155, about one-half were found to be suffering from mental defects of a congenital nature, the other half from acquired mental disorders. Comparing these figures with those tabulated by Sir Arthur Mitchell in his work* published in 1862, the division was not always so. In that year an analysis of 963 cases, consecutively examined, showed that 72·7 per cent. were suffering from idiocy and imbecility, and 27·3 per cent. from acquired insanity, dementia, &c.

The change which has taken place is probably fully accounted for by the fact that the patients in private dwellings consist in far greater proportion now than formerly of patients who have been removed from asylums. Most of these are patients whose insanity has been acquired, while those reported to the Board as pauper lunatics, and left from the first under the care of relatives, are mostly of the class of congenital imbeciles.

In classifying patients, however, under private care, it is perhaps more natural to group patients suffering from dementia with those whose mental defect is congenital than with those whose insanity is acquired. When this is done, I find that among the patients visited by me in 1895, 76·4 per cent. were suffering from imbecility, idiocy, and dementia, and 23·6 from melancholia and mania.

The proportions of the insane, ascertained under this classification at three different periods during the last 28 years, but in more or less different areas of the country, are as follows:—

	Dr Pater- son in 1867.	Dr Fraser in 1881.	Dr Lawson in 1881.	Dr Suther- land in 1895.
I. Imbecility, Idiocy, and De- mentia, }	86·5	68·3	77·8	76·4
II. Melancholia and Mania, }	13·5	31·6	22·2	23·6

Between the first and the last years selected, those in Group II. have increased 75 per cent., and at the present time number 272. Their numbers would not have reached such dimensions were it not for the increasing discharge from institutions of chronic and incurable patients, chiefly affected with acquired forms of insanity. To the same cause must be attributed the difference between Dr Fraser's figures and Dr Lawson's, which latter practically agree with mine, the fact being that Fifeshire and Perthshire, with their aggregations of insane from the asylums of Edinburgh and Glasgow, were embraced in the district to which Dr Fraser's calculations refer.

Those unacquainted with or having a superficial knowledge of the insane in private dwellings require to be cautioned against attaching too much importance to the terms, dementia, melancholia, and mania, as *per se* they do not afford any absolute or reliable indication of the suitability or otherwise of placing in private dwellings persons labouring under one or all of these phases of insanity, because in every case in which the condition and symptoms indicated by either of the three terms are not fixed, all of them may appear successively in the same individual. It is not so much the form of insanity which determines the propriety of boarding-out but considerations such as physical infirmities, defective habits, temper, and conduct.

The figures in the Table which follows, showing the number of patients suffering respectively from congenital and from acquired insanity, cannot in all cases be said to apply to the insanity arising in and chargeable to the parishes of each county. Some patients, on coming upon the register, are left by the parishes liable by the law of settlement for their maintenance in the districts in which they happened to have been certified, but so large is the number

* *The Insane in Private Dwellings*, by Arthur Mitchell, M.D.

belonging to the urban parishes of Edinburgh, Glasgow, and Paisley boarded in specially licensed houses in Stirling and Argyll that the native insane, so to speak, are out-numbered in these counties. This remark does not apply to the other 17 counties, which, with few exceptions, contain their own insane.

Appendix C.
Reports on
Patients in
Private
Dwellings.

Report by Dr
J. F. Suther-
land.

TABLE II.

Showing the Forms of Mental Disorder in the Patients visited in 1895.

Counties Visited.	1. Congenital Idiocy and Imbecility.	2. Acquired Insanity.			Total in Col. 2.	Total of 1 and 2.
		Dementia.	Melancholia.	Mania.		
1. Argyll, . . .	59	56	9	30	95	154
2. Banff, . . .	35	13	5	14	32	67
3. Berwick, . .	17	4	2	3	9	26
4. Clackmannan, .	2	4	...	...	4	6
5. Dumbarton, .	3	3	...	1	4	7
6. Dumfries, . .	14	7	...	3	10	24
7. Elgin, . . .	30	5	2	7	14	44
8. Edinburgh, .	59	19	5	23	47	106
9. Forfar, . . .	55	16	6	14	36	90
10. Haddington, .	16	4	1	3	8	24
11. Inverness,* .	6	2	1	4	7	13
12. Lanark, . .	95	49	7	30	86	181
13. Nairn, . . .	9	3	...	...	3	12
14. Peebles, . .	2	1	...	...	1	3
15. Renfrew, . .	12	4	2	5	11	23
16. Roxburgh, .	6	7	5	9	21	27
17. Ross (Wester),†	24	8	7	8	23	47
18. Stirling, . .	44	73	7	38	118	162
19. Selkirk, . .	5	...	1	2	3	8
20. Western Isles and Outer He- brides, . . }	86	26	8	10	44	130
Total, . . .	579	304	68	204	576	1155

* Four Parishes.

† Eight Parishes.

Patients living with Strangers and Relatives.

Perhaps more remarkable than the change in the proportion of cases of acquired and congenital insanity boarded-out in recent years, when compared with the earlier years of lunacy administration, is the change in the relation of the guardian to the patient.

In 1861, 16·5 per cent. were under the care of strangers; in 1881, 46·5 per cent.; and in 1895, 54 per cent. Corresponding has been the decrease in the proportion of related guardians, which in 1861 was 81·7 per cent.; in 1881, 50·1 per cent.; and in 1895, 45·3 per cent.† In the Western Isles and along the western seaboard of the mainland, however, the percentage of the insane under the care of relatives is the same now as was found to be the case in the area visited by Sir Arthur Mitchell in 1862.

From what I have seen of the guardianship of strangers and of relatives, I am not prepared to say that the altered state of matters is a misfortune, except in so far as it suggests that relatives manifest a lessening anxiety to have anything to do with their insane by declining obligations, both legal and moral, imposed upon them by ties of blood and kinship. The difference between 1881 and 1895 is not nearly so marked as between 1861 and 1881. Apart from the growing

† The figures refer to about half the number of patients in private dwellings. The areas dealt with are not, however, the same in each case.

304
204
68
576

Appendix C.

Reports on
Patients in
Private
Dwellings.

Report by Dr
J. F. Suther-
land.

disinclination of relatives to accept responsibility, a change was bound to have come about in the relation of guardian to patient by the growth of specially licensed houses to hold from 2 to 4 patients. These houses are all managed by strangers, and are taken advantage of by the inspectors of poor of large urban parishes. In 1881 Dr Fraser found in an area of Scotland representing something like one-half, 132 or 17 per cent. in such houses ; in the present year in my own district I found 331, or 28 per cent., and the numbers of such will continue to rise in proportion to the extent to which boarding-out is made use of by urban authorities, who, from experience, know that better surroundings and better conditions of living are to be found in rural districts than in towns. It is the case that a large proportion of the urban insane thus deported to the country, because of unsuitable guardians and unsuitable environments, are not in any real sense patients of the cities and towns responsible for their maintenance. It is not my purpose to set up comparisons between the guardianship of related and unrelated guardians. Good, indifferent, and occasionally bad are to be found ; and in the case of the indifferent and bad, action has to be taken, with a view to rectification or termination. In the past the Board have been loath to

TABLE III.

Table showing the Number under various kinds of Guardianship.

Counties.	Alone	Guardianship.			Total.
		With Strangers.	With Relatives Legally Liable for Patients' Support.	With Relatives not Legally Liable for Patients' Support.	
1. Argyll,	1	94	19	40	154
2. Banff,	1	401	13	12	67
3. Berwick,	—	14	9	3	26
4. Clackmannan,	—	4	2	—	6
5. Dumbarton,	—	7	—	—	7
6. Dumfries,	—	15	4	5	24
7. Edinburgh,	—	53	37	16	106
8. Elgin,	—	24	16	4	44
9. Forfar,	—	57	21	13	91
10. Haddington,	1	11	5	7	24
11. Inverness,*	—	4	4	5	13
12. Lanark,	—	93	51	37	181
13. Nairn,	—	8	3	1	12
14. Peebles,	—	2	1	—	3
15. Renfrew,	1	9	7	6	23
16. Ross (Wester),†	1	11	21	14	47
17. Roxburgh,	1	6	13	7	27
18. Selkirk,	—	1	3	4	8
19. Stirling,	—	152	4	6	162
20. Western Isles and Outer Hebrides, }	2	16	60	52	130
Total,	8	624	293	230	1155
Percentage in 1895,	6	54	25.3	20	100
do. 1881,	2.3	46.5	23.2	27.9	100
do. 1861,	2.8	16.5	81.7		100

* Four Parishes.

† Eight Parishes.

TABLE IV.
Table showing the Number under the various kinds of Guardianship.

COUNTIES.	Relatives Legally Responsible.								Total.	Relatives not Legally Responsible.								Grand Total.							
	Father.	Grandfather.	Step-Father.	Mother.	Grandmother.	Step-Mother.	Son.	Daughter.		Husband.	Wife.	Brother.	Brother-in-Law.	Sister.	Sister-in-Law.	Uncle.	Aunt.		Nephew.	Niece.	Cousin.	Total.	Stranger.	Alone.	
Argyll,	5	-	-	7	-	-	1	4	1	1	19	8	3	9	1	4	4	2	3	6	40	59	94	1	154
Banff,	3	-	-	7	-	-	2	-	-	-	13	2	2	4	-	-	-	1	-	-	12	25	41	1	67
Berwick,	3	-	-	6	-	-	-	-	-	-	9	2	-	1	-	-	-	-	-	-	3	12	14	-	26
Blackmannan,	1	-	-	1	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	2	4	-	6
Dumbarton,	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7
Dumfries,	8	-	-	3	-	-	1	1	1	1	4	2	2	1	1	1	1	-	-	-	5	9	15	-	24
Edinburgh,	5	-	-	24	-	-	1	-	1	1	37	2	2	10	-	-	1	-	1	-	16	53	53	-	106
Elgin,	5	-	-	9	-	-	-	-	1	1	16	-	1	-	-	-	-	1	-	1	4	20	24	-	44
Forfar,	6	1	-	14	-	-	-	-	-	-	21	1	1	8	-	-	3	-	-	-	13	34	57	-	91
Gaddington,	2	-	-	1	-	-	-	-	-	-	5	1	1	6	-	-	-	-	-	-	7	12	11	1	24
Inverness,	1	-	-	2	-	-	-	-	-	-	4	2	-	1	-	1	-	-	-	1	5	9	4	-	13
Lanark,	12	-	-	32	1	1	-	2	2	1	51	4	3	23	-	1	-	-	-	-	37	88	93	-	181
Nairn,	2	-	-	1	-	-	-	-	-	-	3	-	-	1	-	-	-	-	-	-	1	4	8	-	12
Peebles,	2	-	-	1	-	-	-	-	-	-	1	1	-	1	-	-	-	-	-	-	1	1	2	-	3
Renfrew,	2	-	-	5	-	-	-	-	-	-	7	1	-	4	-	-	-	-	1	-	6	13	9	1	23
Ross (Wester),†	12	-	-	5	-	-	2	-	1	1	21	3	1	6	-	1	1	1	1	1	14	35	11	1	47
Roxburgh,	2	-	-	6	-	-	-	1	-	2	13	2	2	4	1	-	-	-	-	-	7	20	6	1	27
Selkirk,	1	-	-	2	-	-	-	-	-	-	3	-	-	3	-	-	-	-	-	-	4	7	1	-	8
Stirling,	-	-	-	3	-	-	-	-	-	1	4	2	1	2	-	-	1	-	-	-	6	10	152	-	162
Western Isles, Skye, and Outer Hebrides, }	29	-	-	25	-	-	-	-	3	3	60	16	3	23	1	1	3	3	1	1	52	112	16	2	130
Total,	94	1	2	153	1	3	6	9	9	13	293	43	20	111	4	10	15	8	10	11	232	523	624	8	1155

* Four Parishes.

† Eight Parishes.

Appendix C.
Reports on
Patients in
Private
Dwellings.Report by Dr
J. F. Suther-
land.

Appendix C.

—
Reports on
Patients in
Private
Dwellings.

Report by Dr
J. F. Suther-
land.

disturb the ties of blood and kinship, except where there could be little doubt that the patient was so badly neglected that active interference became an absolute necessity. Occasionally, such interference is still a necessity, with the result that parent and child, brother and sister, &c., have to be separated. Nothing is said or done in the course of visitation to encourage relatives who are morally or legally bound to take an interest in their less fortunate relatives to rid themselves of responsibilities. At the same time insistence upon the Board's requirements is not forgotten. Rather one encourages related guardians, including those who are never satisfied with the amount of public relief given, to manifest, in many little ways by acts of kindness, an interest in their less fortunate relatives, many of whom are able to appreciate and are grateful for the evidence that they are not forgotten. And thus it is, that patients living with near relatives do not receive the same amount of aliment as strangers, what is needed, to secure a modicum of comfort, health, and contentment, being provided by members of the family who are in a position to help. Nothing is done to disturb a healthy feeling of this kind by leading related guardians to expect that the parish and the State will step in and provide everything.

The foregoing table has been compiled with some care in order to indicate the relative position of the family tie which binds the insane to their kith and kin, and so far it is in agreement with one's preconceived ideas. Thus, among relatives legally responsible, mothers have assumed the care of 153, fathers 94. Wives care for 13 insane husbands and husbands for 9 insane wives. With relatives not legally responsible, sisters assume the responsibility and care of 111 brothers, and brothers the care of 43 sisters. Having regard to the fact that men's work is seldom done at home, it is not surprising to find the proportion of 160 female related guardians to every 100 males, among all degrees of kinship to patients.

There are still a few patients who live alone, but their numbers have decreased greatly. In 1861 the percentage was 2·8 per cent.; in 1881 it fell to 2·3 per cent.; and in 1895 to ·6 per cent. The 8 whom I visited living alone are well able to look after themselves, and may be trusted to do so. None of them are inclined to wander, or to behave in a way offensive to friends and neighbours who take a kindly interest in them, which is not resented provided it is done judiciously, and not carried too far.

Cost of Maintenance.

The average cost for the maintenance of 1151* lunatics in the half of Scotland visited by me may be put down at 6s. 4d. per week, or £15, 15s. per annum. In this calculation 35s. per annum—a fair estimate—is allowed for clothing, &c. This sum, in advance of the figure arrived at by Dr Fraser in 1881, is not to be wondered at when it is borne in mind that the larger parishes in the Lowlands have in the interval increased the weekly allowances. For patients living with strangers, Lowland parishes, for the most part, allow from 6s. to 7s. per week, and clothing, &c. in addition, which would bring up the annual cost from £15, 12s. and £18, 4s. to £17, 7s. and £19, 19s. per annum. No less than 612 of the 1151, or 53 per cent., were on this liberal scale. Two hundred and ninety-three, or 25 per cent., were in receipt of from 4s. to 5s. per week, and 246, or 21 per cent., under 4s., and as low as 1s. Of the 246 on this lower rate of aliment, the Western Isles, Ross (Wester), and Argyll contribute 70 per cent., the Western Isles and Outer Hebrides contributing no less than 117, or 46 per cent. In former times, in many parishes, money was given in lieu of clothing, but the arrangement proving unsatisfactory, owing to abuses creeping in, apparel is now universally provided by the parish as required.

Variations in weekly allowances, ranging from 7s. to 4s. and 1s. per week, raise one or two questions of importance. There can be no doubt whatever of the adequacy of the provision made ~~from~~ the 612 maintained at from 6s. to 7s. per week. Those for the most part reside with strangers, but in some cases with related guardians, either legally responsible for their maintenance or not so. It will be admitted that the purchasing power of money was at no time greater than it is at present, and, therefore, it may be accepted that 6s. and 7s.

* In four cases the allowance had not been determined at date of visit.

TABLE V.

Showing the Average Weekly Alimentary Allowance to Patients.

Appendix C.

Reports on
Patients in
Private
Dwellings.
Report by Dr
J. F. Suther-
land.

Counties.	7s. and up.	6s. and under 7s.	5s. and under 6s.	4s. and under 5s.	3s. and under 4s.	2s. and under 3s.	Under 2s.	Total.
1. Argyll, . . .	21	53	33	19	15	11	2	154
2. Banff, . . .	5	15	26	10	8	2	1	67
3. Berwick, . . .	9	6	3	3	2	2	1	26
4. Clackmannan, . . .	1	3	1	-	1	-	-	6
5. Dumbarton, . . .	4	1	-	1	1	-	-	7
6. Dumfries, . . .	8	6	5	4	1	-	-	24
7. Edinburgh, . . .	38	30	14	15	6	-	3	106
8. Elgin, . . .	2	15	13	7	5	1	1	44
9. Forfar, . . .	18	49	15	5	1	2	1	91
10. Haddington, . . .	10	1	7	2	-	1	1	22
11. Inverness,* . . .	1	-	10	2	-	-	-	13
12. Lanark, . . .	76	39	18	23	13	11	1	181
13. Nairn, . . .	1	5	3	3	-	-	-	12
14. Peebles, . . .	2	-	-	-	-	1	-	3
15. Renfrew, . . .	3	11	5	2	-	1	1	23
16. Ross (Wester),† . . .	2	2	6	8	19	8	2	47
17. Roxburgh, . . .	11	3	5	3	1	1	1	25
18. Selkirk, . . .	5	1	1	1	-	-	-	8
19. Stirling, . . .	108	46	4	4	-	-	-	162
20. Western Isles and Outer Hebrides, } . . .	-	1	7	5	16	45	56	130
Total, . . .	325	287	176	117	89	86	71	1151

* Four Parishes.

† Ei ht Parishes

a week not only provides for food, house accommodation, &c., but leaves a fair margin of profit for the guardians. The large number in receipt of 5s., 4s., 3s., and 2s., &c., reside with relatives legally or morally bound to assume some share of the responsibility for their care and maintenance, and the smaller allowances have thus to be looked at in the light of contributions from public funds in aid of the family exchequer. In every district in Scotland the position of the patient is expected to assimilate but not to excel that of the family of which he is a member and of the community in which he resides, and which has to bear the burden of his maintenance. Judged by this standard—a perfectly fair one—I cannot say that the 246 on the lower scales of aliment gave evidence of stinted food supplies. Exceptional cases there may be, but into these the Board make full investigation where there is the suspicion of a patient having to suffer, in consequence it may be, of the temporary poverty of the household. In Insular and Highland parishes many things conspire to bring about temporary distress in the home of a crofter or fisher, such as a poor fishing or the loss of cattle, and when these matters are brought to the notice of inspectors of poor, as a rule, they do not hesitate to take whatever steps are necessary to meet such emergencies. But experience has shown that where these contingencies are absent, and the allowance has been increased, the patient was not one whit better off. I should not forget to add that it would be a mistake to conclude that 6s. in the Lowlands goes three times as far towards the cost of maintaining a patient as 2s. in the Western Isles. Having regard to house rent, fuel, and the ease of maintaining simple and wholesome food, it would be more correct to say that 2s. in the Highlands goes at least as far as 4s. in the Lowlands. For example, take the question of house rent. In the Lowlands a house rented at £8 a year, and occupied by the average number of six, including the lunatic, would mean a payment on behalf of him in name of rent or lodging of 6d. per week; whereas in the Highlands a crofter house, with the same accommodation and the same number of occupants, would be rented at

Appendix C.

Reports on
Patients in
Private
Dwellings.

Report by Dr
J. F. Suther-
land.

£3 a year, of which the contribution on behalf of the patient would be 2½d. per week. Similarly, the cost of living is lower in the Highlands, not so much from the cost of food being less, but from the fact that a more palatable and more varied dietary, although not more nutritious, is demanded in the Lowlands.

TABLE VI.

Showing the Number of those who have and have not been Inmates of Asylums.

Counties.	Numbers who have been in Asylums.	Numbers who have not been in Asylums.	Totals.
1. Argyll,	103	51	154
2. Banff,	23	39	67
3. Berwick,	10	16	26
4. Clackmannan,	5	1	6
5. Dumbarton,	4	3	7
6. Dumfries,	12	12	24
7. Elgin,	19	25	44
8. Edinburgh,	61	45	106
9. Forfar,	48	43	91
10. Haddington,	11	13	24
11. Inverness,*	7	6	13
12. Lanark,	96	85	181
13. Nairn,	4	8	12
14. Peebles,	2	1	3
15. Renfrew,	11	12	23
16. Roxburgh,	22	5	27
17. Ross (Wester),†	19	28	47
18. Stirling,	145	17	162
19. Selkirk,	3	5	8
20. Western Isles and Outer Hebrides,	20	110	130
Total,	630	525	1155

* Four Parishes.

† Eight Parishes.

The foregoing table has been constructed with the view of showing how many have been inmates of asylums and how many not. In the latter category are to be found 525 or 46 per cent. of the whole. The proportion is much higher in seven of the counties, and the same would be true of Argyll and Stirling, if the basis of calculation was one of chargeability and not of residence. One cannot fail to be struck with the position of the Western Isles and Outer Hebrides with its 130 insane, 20 of whom or 18 per cent. have been inmates of asylums, 54 per cent. representing the percentage of the 19 counties as a whole. Two explanations are forthcoming for this exceptional position, first, the large proportion of imbeciles and idiots on whose behalf public relief is claimed and granted, and second, the question of the cost of maintenance in an asylum, which thrice exceeds the cost of retaining them in private dwellings in insular parishes. One can have some idea of what the sending of one patient to an asylum means to the poor rates in a parish like Barvas, where the poor rate is 7s. 4d. per £—a rate only exceeded by the parish of Nesting, where it mounts to 9s. 1d. To the former parish the removal of one lunatic to the asylum would raise the rates from 7s. 4d. to something like 7s. 5½d., and to the latter the removal of one would increase the assessment from 9s. 1d. to 9s. 3½d. In parishes bearing a heavy burden such as these, Parish Councils endeavour to avert, if possible, removal to an asylum, to which recourse would be had as a last resort.

It may be of interest to note that 265 or 23 per cent. of the 1155 have been intimated to the Board since 1870, 370 of these before 1859, that 340 or 29 per cent. were intimated between 1875 and 1884, and 550 or 48 per cent. within the last decenniad.

TABLE VII.

Movements among the Insane in Private Dwellings, including (a) Removals, Recoveries, Deaths, &c. ; and (b) Admissions.

Appendix C.

Reports on Patients in Private Dwellings.

Report by Dr J. F. Sutherland.

	(a.) Removals, Recoveries, Deaths, &c.				Total.	(b.) Admissions.		Total.	Balance
	Died.	Removed to Asylum.	Recovered.	Removed from Roll.		Discharged from Asylums unrecovered.	Intimated by Inspectors of Poor.		
Argyll,	4	7	1	1	13	2	4	6	- 7
Banff,	3	3	-	-	6	2	7	9	+ 3
Berwick,	2	2	2	-	6	-	1	1	- 5
Clackmannan,	-	-	-	-	-	-	2	2	+ 2
Dumbarton,	-	-	1	-	1	-	-	-	- 1
Dumfries,	2	2	-	1	5	1	2	3	- 2
Elgin,	6	4	-	-	10	1	5	6	- 4
Edinburgh,	5	8	5	1	19	42	10	52	+ 33
Forfar,	3	5	-	1	9	25	5	30	+ 21
Haddington,	6	2	-	-	8	1	1	2	- 6
Inverness-shire,*	2	-	-	-	2	-	2	2	-
Lanarkshire,	12	14	1	2	29	38	29	67	+ 38
Nairn,	1	-	-	-	1	1	2	3	+ 2
Peebles,	1	1	-	-	2	-	-	-	- 2
Renfrew,	3	2	-	-	5	10	-	10	+ 5
Roxburgh,	-	-	4	1	5	1	2	3	- 2
Ross (Wester),†	3	-	-	-	3	1	3	4	+ 1
Stirling,	5	4	2	-	11	4	2	6	- 5
Selkirk,	-	2	1	1	4	-	-	-	- 4
Western Isles and Outer Hebrides, } 5	4	-	1	1	10	4	11	15	+ 5
	63	60	17	9	149	133	88	221	+ 72

* Four Parishes.

† Eight Parishes.

From such causes as death, recovery, removal from roll, and transference to asylums, 149 patients have been removed during the year from the roll of insane in private dwellings in the district visited by me, death and transference to asylums accounting for 63 and 60 respectively. On the other hand, 221† new cases have been added, giving a balance of 72 in favour of the admissions, or an increase of 6·2 per cent. on a total of 1155.

Admissions.

Of admissions there were 221, 88 of whom were registered as in private dwellings on intimation by Inspectors of Poor, and 133 on removal from asylums as unrecovered. It is by the latter method mainly that an extension of boarding-out is to be looked for in the future.

Recoveries.

The number of recoveries was 17, or 1·4 per cent. But this recovery rate, small as it is, would not have been attained, were it not for the fact that 11 of the cases were those of asylum patients on probation for varying periods up to a year, some of whom had all but recovered before discharge. While that is so, there need be little doubt that home life with its varied interests, new surroundings and associations, a degree of freedom gradually extended, greater inducements and opportunities for work in villages and rural districts, in addition to the individual care bestowed by guardians, often relatives, upon their charges, tends to speedy recovery. The private dwelling to some partakes largely of the

† The totals of 149 and 221 include patients discharged on probation.

Appendix C.

Reports on
Patients in
Private
Dwellings.

Report by Dr
J. F. Suther-
land.

nature of a convalescent home, in which absolute recovery takes the place of improvement. It is, nevertheless, matter for observation that 6 recoveries should have taken place among those believed to be hopelessly insane, but in one or two of these cases the mental deviation was never strongly marked. One of the cases had been on the register for 37 years, the other five from periods varying from 4 to 12 years.

Removals from Poor Roll.

Of removals from the poor-roll there were eight, three of whom voluntarily left the dwellings in which they had been placed.

Removals to Asylums.

There were 60, or 5·1 per cent. removed to asylums—a small percentage to prove unsuitable for private dwellings, or to have been put under the care of guardians who after trial came short of what was expected of them. Of the 60, ten patients proved unsuitable after lapses of time varying in duration, owing to their again becoming acutely insane, or to the manifestation of conduct which made their presence in a community or a household not free from risk or objection; five had wandering habits, aimless in two cases, deliberate in three; five were suffering from physical infirmities which required the resources and appliances of the asylum, and five were removed because of unsatisfactory guardianship. The deaths of guardians and the difficulty in procuring suitable successors led to the return to the asylum of a few, but this, I have reason to think, will in time be rectified, and the patients again placed in private dwellings.

Accidents.

It is gratifying to be able to record the absence of any casualty in the district visited by me which might be considered as grave. It would be difficult to find such an immunity from untoward occurrences, arising either by accident or design, in any collection of 1155 persons either in rural districts, towns, or institutions. No sexual accident has taken place, although out of a total of 689 females, 267, or 38 per cent., were of a child-bearing age. The absence of any such occurrence affords, on the whole, striking testimony to the care and supervision exercised by guardians, who are warned at each visit of the necessity for close and watchful supervision.

The accidents consisted of one dislocation in an elderly female, two fractures, two sprains, two burns, and a slight wound inflicted with a dung-fork in a fit of temper by one male patient on his fellow. This occurrence was made known to the Board at once, and the patient's removal to the asylum was speedily carried out.

Deaths.

Of deaths there were 63, producing a death-rate of 4·9 per cent. The causes of death are detailed in Table VIII. Regarding the causation, pulmonary disease, it will be observed, heads the list with 15, or 23 per cent. The solitary case which succumbed to typhoid fever is satisfactory proof that the thousand and odd dwellings sanctioned or licensed by the Board in the district visited by me are on the whole in a sanitary condition. Thirteen, or 20 per cent., succumbed to cerebral disease, two being cases of general paralysis of the insane. Heart disease accounted for 7, or 11 per cent.

TABLE VIII.

Causes of Death.

Appendix C.

Reports on
Patients in
Private
Dwellings.
2 Report by Dr
— J. F. Suther-
15 land.

1. Cerebral and Spinal Affections :—		3. Abdominal Affections (<i>continued</i>) :—	
(1) Apoplexy and Paralysis, . . .	8	(6) Diarrhœa, . . .	5
(2) Epilepsy and Convulsions, . . .	1	(7) Disease of Kidneys, . . .	2
(3) Organic Diseases of the Brain, . . .	4		
	13		
2. Thoracic Affections :—		4. Specific Diseases :—	
(1) Phthisis,	5	(1) Influenza,	2
(2) Pneumonia,	1	(2) Typhoid Fever,	1
(3) Bronchitis,	9	(3) Measles,	1
(4) Heart disease,	7		4
	22		
3. Abdominal Affections :—		5. Other Causes :—	
(1) Hæmatemesis,	1	(1) Debility and Old Age,	4
(2) Diseases of Liver,	2	(2) Marasmus,	2
(3) Peritonitis,	3	(3) Diabetes,	1
(4) Intestinal Obstruction,	1	(4) Glandular Tumour,	1
(5) Enteritis,	1		8
		6. Unknown Causes,	
		Total,	
		63	

PRIVATE PATIENTS.

The number of private patients visited by me in private dwellings and specially licensed houses was 192. This total refers not only to registered patients, but also to non-registered patients whose estates are under curatory, and to persons whose mental condition and position were reported upon after visitation. Of the 192, 66 were males and 126 females, males being to females in the proportion of 100 to 190. Among the pauper insane in private dwellings the proportion was shown to be 100 to 150.

Seventy-two or 37 per cent. of the whole reside in the county of Edinburgh, while in Lanarkshire, with considerably more than twice the population of Edinburgh, there are only 17. On the 1st of January 1895, the number of private registered insane in private dwellings in Scotland was 113. It is noteworthy that the numbers coming under the cognizance and supervision of the Board, as distinguished from the number of *registered* patients, have been steadily rising. In the three periods selected, while the registered insane has been practically stationary, the numbers standing at 111, 115, and 111, the curatory patients not registered have multiplied more than fourfold, the numbers in the first year having been 50, in the intermediate 185, and in the last 228. The explanation of this rise is to be found in the growing operation of the law of 1880, which made it competent for Sheriffs, including Sheriffs-Substitute, to exercise the same power as judges of the Supreme Court in the appointment of judicial factors for estates, the yearly income of which did not exceed £100. Not only has this enactment, recommended, I understand, by the Board, years before it received the sanction of the legislature, resulted in a considerable saving to small estates which could ill bear the more costly procedure of the Court of Session, but it has been the means of bringing under official notice and control not only the administration of small estates which hitherto escaped that supervision, but also the persons of the insane, as well as of such as suffered from a degree of mental incapacity, which, while falling short of certifiable insanity, unfitted them for the proper management of their affairs. All persons to whom curators-bonis have been appointed on account of mental incapacity, whether formally certified insane or not, are reported to the Board by the Accountant of Court, as well as a statement of their effects, including the approximate annual income derivable from capital funds. The incomes of the great majority of curatory cases are under £100 a year, not a few verging on the higher pauper

Appendix C.

Reports on
Patients in
Private
Dwellings.

Report by Dr
J. F. Suther-
land.

allowance of 7s. per week, while, on the other hand, a few are met with whose incomes amount to several hundreds, and in exceptional cases to thousands.

Of the private and curatory patients, 10 died, 1 recovered, and 2 were removed to the asylum, one in consequence of a most unfavourable report as to guardianship submitted by me to the Board. With this exception, the individual reports made by me on patients under curatory were in all respects favourable.

REPORT BY DR CHARLES MACPHERSON.

Report by
Dr Charles
Macpherson.

In accordance with the instructions of the Board I have now the honour of submitting the following general report, bearing on the work done by me in the visitation of the insane in private dwellings during the months of June, July, and August of the current year. I have visited in all 922 patients, on the condition of each of whom I have already made individual reports.

The districts visited by me include the entire counties of Orkney, Shetland, Caithness, Sutherland, 22 parishes in Ross, 10 parishes in Inverness, including the town of Inverness, and practically the whole of the county of Fife.

The following table gives the numbers visited in each county :—

Counties.	Male.	Female.	Total.
Shetland,	25	28	53
Orkney,	18	26	44
Caithness,	29	43	72
Sutherland,	12	25	37
Ross,	46	37	83
Inverness,	49	91	140
Fife,	184	309	493
Total,	363	559	922

In the course of my visitation I had the opportunity of observing the two aspects of the system practised in Scotland of providing for the insane in private dwellings, viz.:—

1. The boarding with unrelated guardians of patients in private dwellings, singly or in groups of from two to four in houses specially licensed to receive more than one patient.

2. The residence with relatives, under the sanction of the Board, of certified insane people who, in many cases, have been all their lives in the homes in which their residence is sanctioned.

In the case of the first group the guardians simply board the patient as a matter of business, and large and increasing aggregations have thus grown up in many of the parishes visited by me, such as Markinch, Falkland, Collessie, Kilconquhar, Leuchars, Auchtermuchty, and Strathmiglo, in the county of Fife, and, more recently, in the parish of Inverness, in the neighbourhood of the Inverness District Asylum. Many of the guardians in these districts have had patients boarded with them for a very long time, and are thoroughly conversant with the best methods of managing them. The great majority of those guardians have evidently a sincere liking for their patients, take great interest in their welfare and comfort, and treat them in every way like members of the family. The patients eat at the same table, and enter into the work and enjoyment of the household on a footing of equality. In most of these cases a feeling of mutual affection has been gradually developed. Both patient and guardian are benefited. The patient, happy in his freedom from the absolutely necessary discipline of an asylum, generally improves much in his bodily health, and with the improvement there is frequently marked amelioration of his mental symptoms. He becomes interested in the affairs of the household, in many cases coming to regard the house and garden—and farm where there is one—

as his own. Of this result I have seen several examples. As a consequence, the guardian reaps the benefit of willing assistance in his every-day labour, and has often to restrain the patient from doing too much work, rather than urge him on to do more. In some houses, on the other hand, it appeared to me that the patients, though kindly treated, entered less fully into the family life than would have been desirable, and in such cases efforts were made, it is hoped successfully, to get the guardians to take a more correct view of their duties. But as regards specially licensed houses and guardians generally, I can only speak in terms of the highest praise and satisfaction. The houses are commodious, well-lighted and ventilated, and kept thoroughly clean. Most of them have large gardens, which are generally well kept, to a very large extent, by the labour of the patients. The guardians treat the patients as well as they do themselves, indeed, in many cases, better as far as sleeping accommodation is concerned. They are well-fed, and judging by what I saw, and by the records of the local medical officers, in very many cases, they have improved greatly in bodily health since exchanging the asylum life for their present one under private guardians. I do not wish it to be understood that I met with no complaints on the part of patients. One must always expect to find a considerable number among patients, who are otherwise quite suitable for boarding-out, who consider themselves perfectly sane, and, consequently, are impatient of all control, and resent any guardianship however kind. Again there is always a certain number of the more demented patients who tell you they would prefer the asylum life to the quieter life of the country, but who do not require asylum treatment, and are very much better as they are. Taking the cases I have visited as a whole, however, I have no hesitation in saying that, in the case of the great majority of the patients boarded-out from establishments, their bodily health has improved, their happiness has been increased, and I think the rarity of any serious accident shows, that as far as their own interests are concerned, the arrangements made for their care are quite sufficient.

As regards the arrangements for their care looked at from the point of view of the public interest, the investigation I was requested to make into a complaint from one district led me to take every opportunity of inquiry as to whether aggregations of insane people were regarded with dislike by the community in general in the districts in which they occur. The result of the special inquiry I have already reported to the Board; but the result of the general inquiry was that the presence of the patients was not objected to but rather desired as a welcome source of increased revenue. In no case did I hear of any outrage or offence to public decency on the part of any of the patients, and in all the districts inspected by me where aggregations occur, there were many guardians who anxiously wished for more patients, and a certain number of people who at present have no patients but were anxious to have some. Inspectors of Poor and Medical Officers also assured me that they seldom heard any complaints from people residing in the neighbourhood of licensed houses. In this connection I should like to make a few remarks on the question of the advisability of allowing these aggregations of insane persons to grow to larger dimensions. While I think it would be better not to increase, to any great extent, the percentage of insane patients in two or three villages, but rather to establish new settlements in other districts wherever suitable house accommodation and guardianship could be found, still, if there are great difficulties in the way of carrying out this suggestion, I can see no very serious objection to allowing some extension of numbers, in the case of many of the districts where the system is already established and working well; districts where there are no large public works, where strangers do not come to reside in any large numbers, and where the inhabitants have become so accustomed to having insane people among them, that public opinion resents any interference with or annoyance offered to them. But the case is very different with rapidly-growing places where traffic is considerable, and, consequently, I think any extension of the system at such places, for example, as Thornton, should not be encouraged. As regards the local supervision, I have very little to say. The Inspectors of Poor of the large towns who are responsible for the great majority of the patients in specially licensed houses evidently fully realise their responsibilities, and are most attentive in visiting; clothing is liberally supplied, and special recommendations by the Medical Officer are at once and fully carried out. The medical supervision in these districts is thorough, and in most cases far exceeds the requirements of the Board. But after all is said the most efficient safe-

Appendix C.

Reports on
Patients in
Private
Dwellings.Report by Dr
Charles
Macpherson.

Appendix C.

Reports on
Patients in
Private
Dwellings.
Report by Dr
Charles
Macpherson.

guard against improper treatment of patients is undoubtedly the public eye, and I regard it as a distinct advantage that most of these aggregations are in villages or hamlets where there are many residents not directly concerned in the boarding-out system, and where the every-day life of all the inhabitants is seen and freely commented on by the community at large. The patients when well are never confined to the house, but are out in the garden and fields whenever the weather allows. Neighbours in these country villages go in and out of each other's houses with a freedom unknown in more thickly-populated districts, and the family life of the guardian is thus thoroughly known. Consequently, one may feel assured that any case of systematic neglect or ill-usage would soon come to the knowledge of some official, and the extreme rarity of any complaint is the strongest testimony in favour of the kindness and efficiency of the guardianship generally.

Turning now to the consideration of the case of single patients living with related guardians, we are met at the outset with the fact that those guardians, or the great majority of them, are not keeping their insane relatives for profit in the same way as the unrelated guardian, and that they are not, as a rule, paid anything like the same rate of board. Consequently, one cannot set up a hard and fast rule as to the nature and extent of the accommodation provided for them. Each case must be judged on its own merits. Different districts in Scotland have widely different standards of what the people regard as absolutely essential to comfort in the way of house accommodation, cleanliness, &c. A house which would be regarded by many crofters in some parts of the Highlands, as affording sufficient and suitable accommodation for his family, would not be occupied by a similar class of people in some of the Lowland counties. Perhaps it may be conceded that in open country districts, and where the inhabitants are mostly working out all day and only occupy their houses at night, there is not the same necessity for the larger cubic space, or the same amount of light that would be insisted on in a town or village or where most of the inmates are occupying the house both night and day. However, making full allowance for the different standards in different districts, the Board require that all houses, in which they sanction the residence of an insane patient, shall be adequately lighted and ventilated, and sufficiently comfortable to ensure that the patient shall not suffer in health from defective accommodation, and this requirement is, in the great majority of cases, fulfilled.

In some districts of Scotland the standard of comfort in this respect is low, and in the case of patients living with relatives, on whom falls the duty of repairing their own houses, some difficulty is not infrequently met with in having necessary repairs and improvements carried out. But the views of the community in such districts in regard to what constitutes comfortable dwellings are gradually being raised, and the surroundings of the insane are thus improving from year to year with the general advance in comfort.

As to whether in the interests of the patient it is better to place an insane individual with a near relative or with a stranger, much might be said on both sides. There is no doubt, I think, that congenital imbeciles and idiots are in most cases better with their friends than they could possibly be with strangers. One often sees examples of mothers who seem to lavish all their affection and care on their imbecile offspring, to the neglect even of their sane children. In many cases of the more degraded idiots no one, unless impelled by feelings of affection, would tolerate them on any terms which a parish council might reasonably be expected to offer. On the other hand, when one takes into consideration the strong heredity of insanity—the fact that the imbecile or idiot child is usually the offspring of a parent with an unstable nervous system—we must recognise the fact that, while the child will probably be treated with great affection, it will not likely be brought up in a way to give it the best chance of improving mentally. The firmness and tact necessary to make any progress with the imbecile's education is, generally from mistaken ideas of kindness to the child, not exercised, and the only hope of improvement in these cases is in removal to an institution or to the care of an intelligent guardian. Again, as is well known, in cases of delusional insanity, there is often a fixed idea in the patient's mind that their nearest relatives are their greatest enemies, and the cause of all their trouble. Patients of this class, who are quite unmanageable at home, often do remarkably well as single patients with strangers, or as one of several inmates of a specially licensed house.

The local inspection of these cases by Inspectors of Poor and Medical

Officers is on the whole satisfactory. There is not, however, as a rule, the same willingness on the part of many parish councils in the country districts to grant liberal supplies of clothing as is the rule with those of the larger city parishes. They do not seem to appreciate the fact that the insane, as a rule, are of comparatively lower vitality than their neighbours and require warmer clothing for the maintenance of their health. Consequently, it has been necessary, in a considerable number of cases, to insist upon increased supplies of clothing. The medical visitation is usually up to the Board's requirements; indeed, considering the unwillingness in many cases of the parochial authorities to pay the Medical Officer specially for his visits, I was surprised to find the medical visitation so well carried out as it is.

As regards the central supervision, I feel that with the present staff and the constantly increasing number of patients it is almost impossible to make it more efficient than it is at present.

Appendix C.
Reports on Patients in Private Dwellings.
Report by Dr Charles Macpherson.

REPORT BY DR J. BATTY TUKE, JUNIOR.

Report by Dr J. Batty Tuke, junior.

In compliance with the request of the Board, I beg to submit a report of the visitation of lunatics in private dwellings made by me during the months of September, October, and November, when acting as Visiting Officer, in consequence of Dr Lawson's absence on sick-leave.

The following table will show the number and distribution of patients visited:—

Counties Visited.	Parishes Visited.	Curatory and Private Patients.			Pauper Patients.					
					Single Patients.			In Specially Licensed Houses.		
		M.	F.	T.						
Aberdeen,	49	2	4	6	47	65	112	12	7	19
Ayr,	30	1	4	5	36	34	70	18	46	64
Bute,	5	6	2	8	19	17	36	6	8	14
Kincaidine,	8	2	4	6	3	6	9	1	12	13
Perth,	—	—	—	—	—	—	—	—	—	—
(a) Aberfoyle and Port of Monteth,	2	—	2	2	1	1	2	18	59	77
(b) Other Parishes,	42	13	17	30	48	37	85	38	26	64
Wigtown,	13	1	1	2	17	17	34	—	—	—
Total,	149	25	34	59	171	177	348	93	158	251

General Observations.

All visits paid by me were essentially of the nature of 'surprise visits.' Until I was in the house, no guardian had any idea that I was connected with the General Board of Lunacy. I was, therefore, enabled to see exactly how the patients lived from day to day, and to judge accordingly.

With very few exceptions, I found that the pauper lunatics in private dwellings were well provided for in every respect. The standard of bodily health was excellent, dietary and clothing good and sufficient, and the dwelling-houses clean and comfortable. I was convinced that, as far as practicable, the patients were treated as one of the family, and shared everything equally with their guardians.

Amongst the patients visited were a large number of 'new cases,' many of

Appendix C.

Reports on
Patients in
Private
Dwellings.

Report by Dr
J. Batty Tuke,
junior.

whom had been for ten or more years, prior to this year, inmates of asylums or lunatic wards of poorhouses. They were unanimous in expressing their approval of their new surroundings, some adding words to the effect that any loss of such advantages as institutions give was more than compensated for by the feeling of freedom and absence from restraint.

In no case was any wish expressed to return to the asylum, and in several the threat of being sent back was sufficient to ensure good behaviour.

One of the most satisfactory features of the boarding-out system that came prominently under my observation was the care and attention paid by guardians towards infirm and helpless patients.

Young women whose insanity amounts to little more than mild imbecility, might be thought to be unsuitable cases for being cared for in private dwellings, owing to the risk of sexual accident. Most of these are imbeciles boarded with relatives who would not part with them if asylum care were thought desirable, and it is among this class that the risk referred to is greatest; but even among them it is very small, and it is still smaller among those boarded with unrelated guardians. In my opinion it is infinitely better to board such young women with trustworthy guardian in private dwellings than to confine them in asylums, even when that course would be legally possible, which, in some instances, is doubtful.

The boarding-out of young male imbeciles is eminently satisfactory. Those lads—frequently systematically neglected at home, their natural imbecility increased by the ill-usage they have received and the bad habits they have acquired—when placed in farm-houses under kind but firm guardians almost invariably show marked mental and bodily improvement, many turning out willing and useful farm-workers.

Visitation of Counties.

Of the counties visited, the following only call for special observation.

In Ayrshire, a large number of patients have been recently discharged from the asylum on probation. The majority of these are doing well; but it was found necessary shortly after my visit, to replace one patient in the asylum, and on my recommendation another, who was not a suitable case for a private dwelling, was also returned to the asylum. At Ballantrae there is now a large number of patients, almost all of whom are chargeable to the Barony parish. The village is admirably suited for this purpose, the houses being of good size, clean, and carefully kept, and the guardians of an exceedingly high class.

My visit to Arran was made during the month of September, when guardians and patients were living in their 'summer quarters,' the main dwellings being let to visitors. The accommodation provided varied considerably, and, in no instance, was it above criticism, but guardian and patient shared equally the temporary inconvenience.

In Kincardineshire, the Aberdeen Parish Council have found in the parish of Banchory Ternan a number of suitable private dwellings, which are now fully occupied.

I visited them all with the Inspector of Poor of Aberdeen, and found every-thing satisfactory.

In connection with these aggregations of lunatics, I would endorse the opinion expressed by both Drs Fraser and Lawson, that four patients are, in most cases, too many for any one private dwelling. The house becomes too much like a small asylum; the patients usually sit, eat, and sleep in rooms by themselves, and in this way do not share the home life of the guardians to anything like the same extent as those boarded singly or in pairs. Under such conditions, one of the most important advantages of the boarding-out system, viz., constant intercourse with sane individuals is lost.

Amount of Aliment.

Appendix C.

In cases boarded with strangers the allowance is usually 6s. or 7s. per week, but sometimes it is lower or higher according to the nature of the case, the amount of attention required, and the capacity of the patient for doing useful work. The provision made for patients boarded with unrelated guardians is, as a rule, highly satisfactory, and calls for little comment.

With regard to the other class, viz., those boarded with their relatives, the conditions are not so satisfactory. Almost every case that I had to report unfavourably upon came under this head. The amount of aliment given varied from 2s. 6d. to 7s. 6d. per week, and seemed to me to be sometimes unequally distributed. I more than once noticed a helpless idiot drawing a much smaller sum per week than a robust imbecile capable of doing useful work, without, so far as I could see, the respective condition of their parents being very different. This, however, is a matter primarily under the control of Parish Councils.

I would also draw attention to the growing tendency on the part of parents, who have insane or imbecile children, to apply for parochial relief. The idea seems to be becoming universal, owing largely perhaps to the Grant-in-aid from the Local Taxation Fund, that the mere fact of having an insane member of the family entitles them to receive aliment. A sane member of the family may be rendered completely helpless by some illness or accident, and no relief sought for; if, however, in the same family an imbecile exists relief is claimed as a matter of right, even though the parents are apparently not in poor circumstances. On the other hand, the lunatic is not infrequently made to bear the burden of the pauperism of the entire family; as the various members become incapacitated from working, the allowance on account of the lunatic is increased, until at length he becomes practically the support and mainstay of the entire household.

Mishaps and Casualties.

The only occurrence falling under this heading which came under my notice related to the case of a middle aged, demented female who was taken liberties with by a drunken harvester. The man was arrested, but being admitted to bail, fled the country. Careful inquiry showed that no blame was attachable to the guardian.

Private Patients and Patients under Curatory.

These cases were found to be suitably provided for in comfortable homes. No patient made any complaint. Difficulties in visiting this class of patient sometimes arise from the failure of guardians and curators to intimate changes of residence.

Reports on
Patients in
Private
Dwellings.

Report by Dr
J. Batty Tuke,
junior.

APPENDIX D.

INSTRUCTIONS FOR THE GUIDANCE OF INSPECTORS OF THE
POOR IN THE DISPOSAL AND MANAGEMENT OF PAUPER
LUNATICS, PREPARED BY THE GENERAL BOARD OF
COMMISSIONERS IN LUNACY FOR SCOTLAND.

1895.

Appendix D.

Instructions
to Inspectors
of Poor.

Persons Legally Recognised as Pauper Lunatics.

1. The term "Lunatic" is defined by the Statute to include every person certified by two registered medical practitioners to be a lunatic, an insane person, an idiot, or a person of unsound mind.

A "Pauper Lunatic" is any lunatic on whose behalf any allowance or assistance is granted by any Parish Council, whether such lunatic be a pauper or be a dependant.

Duty of Inspectors of Poor to Intimate all Pauper Lunatics.

2. If an Inspector of Poor has reason to think that any pauper within his parish, or any person with whom he is called upon to deal, not being already a certified lunatic, is an insane person, an idiot, or a person of unsound mind, it will be his duty to obtain a certificate as to the person's mental state from a registered medical practitioner, and to be guided by what is said therein as to whether a second medical certificate should be obtained, with a view to the person being intimated and provided for as a pauper lunatic.

If such person is duly certified to be a lunatic, the Inspector of Poor shall within seven days, under a statutory penalty of Ten Pounds in case of failure, notify the fact to the Chairman of the Parish Council, and shall, also within the same period, intimate to the Secretary of the General Board of Lunacy (hereinafter called the Board) the name and residence of the pauper lunatic, and such further particulars as may be called for according to Form P¹ (see list of forms at page 150). The Inspector of Poor should make a like notification and intimation in the case of any private lunatic in an asylum becoming chargeable as a pauper to the parish of which he is Inspector.*

3. Inspectors of Poor may deal with insane persons, under Section 15 of the Act, 25 & 26 Vict. c. 54, on the ground that they are dangerous to themselves or others, or are offensive to public decency. For the duty of Inspectors in such cases, or in the case of insane persons whose right to parochial relief is doubtful, see Minute of the Local Government Board (then Board of Supervision) of 16th December 1869, at page 119 of that Board's "Rules, Instructions, and Recommendations" (1890).

4. Whenever an intimated pauper lunatic of any parish becomes chargeable to any other parish, notice of transference of liability shall be sent to the Board on Form I, both by the Inspector of Poor of the parish by which liability is admitted, and by the Inspector of Poor of the parish which has ceased to be liable.

* In such a case the names of the medical men who certified insanity may be omitted from Form P.

Ways in which Pauper Lunatics may be provided for.

Appendix D.

5. The Inspector of Poor shall, within twenty-one days after intimation of a pauper lunatic has been made to the Board, provide for his care in one or other of the following ways :—

Instructions to Inspectors of Poor.

- (a) By removing him to an asylum, under the procedure set forth in Rules 8-10 ; or
- (b) By removing him to the lunatic wards of a poorhouse licensed for inoffensive and incurable patients, under the procedure set forth in Rule 11 ; or
- (c) By removing him to an institution for the training of imbecile children, under the procedure set forth in Rule 12 ; or
- (d) By placing him in a private dwelling with the sanction of the Board, under the procedure and subject to the conditions set forth in Rules 31-41.

6. In the event of the Inspector of Poor failing to provide for the patient's care in one or other of the methods above mentioned within twenty-one days after being required to do so by the Board, removal to an asylum may be carried out by the Board at the expense of the parish.

7. If the relatives of a pauper lunatic, whose removal to an establishment for the insane it is desired to carry out, refuse to permit such removal, the Inspector shall report the case immediately to the Parish Council for instructions how to proceed.

Procedure to be followed in removing a Pauper Lunatic to an Asylum.

8. The asylum to which the lunatic is removed shall be that of the district in which his parish of settlement is situated ; or, if there is no district asylum, such other asylum as may take the place of a district asylum under agreements and arrangements having the sanction of the Board. On special application the Board may, under exceptional circumstances, sanction the residence of a pauper lunatic in an asylum other than that of his district or parish. Appendix E, page 151, shows the asylums provided for the pauper lunatics of the different counties.

With regard to the removal of female patients to and from asylums, see Appendix C, page 148.

With regard to obtaining the assistance of the Constabulary in removing to asylums lunatics who are dangerous, see Appendix C, page 149.

9. In the case of a pauper lunatic being within a parish which is admittedly not the parish of settlement, and being in a state requiring immediate removal to an asylum, the Inspector of Poor of such parish may either remove the lunatic temporarily to the asylum of the lunacy district in which such parish is situated, or, with the concurrence of the Inspector of the parish of settlement, directly to the asylum of the lunacy district to which the parish of settlement belongs.

10. Pauper lunatics are admitted into asylums on the Sheriff's order, which is granted on the petition of the Inspector of Poor, on Form A (see list of forms at page 150). In filling up this Form the marginal directions on it should be carefully read and strictly adhered to. The following points must also be borne in mind :—

- (a) The Sheriff granting the order may be either (1) the Sheriff of the county in which the lunatic is resident or is found ; or (2) the Sheriff of the county in which the asylum is situated.
- (b) The dates of the medical certificates must be *earlier* than the date of the petition, but not by more than fourteen days.
- (c) One of the certifiers may be the medical superintendent, or consulting or assistant physician of the asylum in which the pauper lunatic is to be placed, provided it be not a private asylum. The certifiers must be registered medical men in actual practice.
- (d) The admission of the patient to the asylum must take place within fourteen days of the date of the Sheriff's order, unless it has been granted by the Sheriff of Orkney or Shetland, in which case twenty-one days are allowed.
- (e) A lunatic, whose case is certified by any registered medical practitioner to be one of emergency, may, without any order by the Sheriff,

Appendix D.

Instructions
to Inspectors
of Poor.

be received into an asylum for a period not exceeding three days from the time of his being brought to it. The document on which the patient is received should, however, show at whose instance the patient is sent to the asylum, and this should be indicated by the Inspector of Poor previously filling up and signing the request for reception attached to Form A.

- (f) For every order granted by the Sheriff for the admission of a pauper lunatic into any Royal or District asylum, a fee of two shillings and sixpence is payable to the Sheriff-Clerk for the general purposes of the Lunacy Act. No fee is payable for a Sheriff's Order for admission of a patient to a parochial asylum.

Procedure for placing a Pauper Lunatic in the Lunatic Wards of a Poorhouse with a Restricted Licence.

11. Pauper lunatics who are both harmless and incapable of deriving benefit from treatment in an asylum are admitted into Lunatic Wards of Poorhouses licensed solely for the reception of such patients, by sanction of the Board granted on the petition of the Inspector of Poor, according to Form C (see list of forms at page 150). The certificate of insanity attached to the form must not be signed by the medical attendant of the lunatic wards of the poorhouse in which it is proposed to place the patient; and the application must be accompanied by a *second* certificate of insanity, unless the patient is already a duly certified and intimated lunatic when application is made. Appendix E, page 151, shows the lunatic wards of poorhouses provided for pauper lunatics in the different counties.

Procedure for placing a Pauper Child of Unsound Mind in a Training School for Imbecile Children.

12. Pauper children of unsound mind, who are capable of deriving benefit from training and treatment in training schools for imbecile children, are admitted into such institutions by sanction of the Board granted on application by the Inspector of Poor, accompanied by two medical certificates according to Form M, except in the case of a child transferred from an asylum, when *one* certificate will suffice (see list of forms at page 150). The names of training schools which receive pauper pupils will be found at page 155.

Liberation, or Removal from the Poor-Roll, of Pauper Lunatics in Establishments for the Insane.

13. When a pauper lunatic has recovered it is the duty of the superintendent of the establishment to discharge him.

Notwithstanding that recovery has taken place, it is desirable that a patient on being discharged should be handed over to the care of a friend or some suitable person, who will conduct him safely to his destination. Inspectors of Poor should, therefore, whenever requested by the superintendent, make arrangements for removing such patients in safety to their homes, or to such other place as will afford due protection, and should, when practicable, enable them to resume their usual work under favourable conditions. A female patient when removed from an asylum must be accompanied by a person of her own sex (see Appendix C, page 148).

14. A pauper lunatic who has not recovered, not being a dangerous lunatic committed at the instance of the Procurator-Fiscal, may be removed from any establishment for the insane and placed in a private dwelling as an out-door patient, by a minute agreed to at a duly constituted meeting of the Parish Council chargeable with his maintenance, or of a committee thereof having due authority. On a copy of such minute, certified as correct by the chairman for the time of the Parish Council, being produced to, and left with, the superintendent of the establishment, such lunatic shall be discharged within seven days, unless the superintendent shall state in writing that in his opinion the patient is dangerous to himself or the public, or in any other way not a fit person to be discharged; and in that case he shall not be removed by the inspector without the sanction of the Board (see section 9, 29 & 30 Vict. c. 51.)

15. An unrecovered pauper lunatic in any establishment for the insane, not

being detained therein as dangerous at the instance of the Procurator-Fiscal, may, by a minute granted at a duly constituted meeting of the Parish Council, or committee thereof having due authority, be removed from the poor-roll, and entrusted to the disposal of any party who shall produce sufficient evidence that he will provide in a manner satisfactory to the Parish Council for the patient's care and treatment. But no lunatic who has thus been taken off the poor-roll can be removed against the written representation of the superintendent that such removal would prove injurious to the lunatic or a risk to the public, except by the authority of the Board; and if his discharge is not so authorised, the Parish Council shall, failing the establishment by them of legal obligations for his support without parochial aid, continue to be responsible to the institution for the cost of his maintenance (see section 11, 29 & 30 Vict. c. 51.)

Appendix D.
—
Instructions
to Inspectors
of Poor.

16. Whenever, as described in either of the two foregoing rules, an unrecovered pauper lunatic has been removed by a Minute of the Parish Council, either from an establishment for the insane, or from the poor-roll, the Inspector of Poor shall, within fourteen days, intimate the fact to the Board, on Form H⁴ or I, as the case may require (see Appendix C, page 149). If, after a patient is discharged, notice is not received from the Inspector of Poor of the patient's removal from the poor-roll, the Board will transmit a schedule to be filled up by the inspector; and if the patient has not been, or is not forthwith to be, removed from the poor-roll, the inspector must fill up the statement of particulars and the application attached to the schedule sent, with a view to obtaining the Board's sanction to the arrangements which have been made for the patient's care. In such cases no medical certificate is required to accompany the application.

17. For the liberation of an unrecovered pauper lunatic detained as dangerous at the instance of the Procurator-Fiscal, application must be made to the Sheriff, on certificates signed by two medical persons approved of by the Procurator-Fiscal, bearing that such lunatic may be discharged without risk of injury to the public or to the lunatic; and if the lunatic is liberated, the inspector shall give intimation to the Board, as directed in the foregoing Rule (see section 19, 29 & 30 Vict. c. 51.)

18. Section 17 of the Act 25 & 26 Vict. c. 54, provides that if the superintendent of any establishment for the insane is of opinion that any pauper lunatic detained therein is so far recovered that he may be liberated without risk of injury to the public or to the lunatic, he shall grant a certificate to that effect, or shall procure one from the medical officer of the establishment, and shall transmit a copy to the Inspector of Poor of the parish to which the lunatic is chargeable; and if the inspector fails within fourteen days from the dispatch of such certificate to take steps for the liberation of the lunatic, the superintendent shall intimate the facts to the Board, who may make inquiry into the circumstances, and, if they think proper, order the lunatic to be discharged. A pauper lunatic discharged under the provisions of this section must be dealt with as an unrecovered lunatic, and the regulations as to his disposal must be observed as in the case of a lunatic removed by minute of a Parish Council (see Rule 16).

19. Under Section 7 of the Act 29 & 30 Vict. c. 51, superintendents are required to certify, at every 1st January occurring after the expiry of three years from the date on which the order of the Sheriff was granted for a patient's reception and detention in an asylum, that his further detention is necessary and proper for his welfare or for the public safety; and in the event of a pauper lunatic being excluded from this certificate, and being liberated as a consequence of his exclusion, the regulations as to his disposal must be observed as in the case of a lunatic discharged by a minute of the Parish Council (see Rule 16).

Removal on Probation of Pauper Lunatics in Establishments for the Insane.

20. Application for the sanction of the Board to the discharge of patients on probation shall be made according to Form G (see list of forms at page 150); but no patient sent to an asylum at the instance of the Procurator-Fiscal shall be liberated on probation without the observance of the statutory requirements applicable to such cases. The period of probation cannot exceed twelve months.

21. Pauper lunatics discharged on probation shall, unless the Board, on

special application, regulate otherwise, be visited once in every three months, by a medical man appointed by the Parish Council, and once in every six months by the Inspector of Poor,* who shall record their visits in the "Visiting Book for Pauper Patients in Private Dwellings" (see list of forms at page 150); and during the period of probation such patients remain subject to visitation by the Commissioners and generally to the Board's instructions applicable to patients sanctioned to reside permanently in private dwellings (see Rules 31-41).

22. Though pauper lunatics on probation may require no parochial aid during the currency of the probationary period, they cannot during that time be removed from the poor-roll, unless certified recovered, nor can any of the conditions on which sanction was granted be altered, without the sanction of the Board.

23. On the order of the Board, or on an entry being made by the medical officer in the visiting book that the patient has ceased to be suitable for remaining out on probation, the inspector shall, within fourteen days thereafter, remove him back to the asylum, and send notice to the Board that this has been done; and when for any reason it is deemed necessary to send the patient back to the asylum, the superintendent is bound to receive him on the simple demand for admission, provided the period of probation is still current.

24. Before the period of probation expires notice must be given to the Board that the patient is to be replaced in an asylum, or a medical certificate must be transmitted to the effect, either (1) that the patient is recovered, or (2) that he is still of unsound mind. If the patient is of unsound mind and continues in the receipt of parochial relief, the certificate should be given according to Form D; and application according to that form—which in probationary cases need only be accompanied by this *one* certificate—must be made to the Board for their sanction to the manner in which the patient is to be provided for. If the patient is no longer to receive parochial relief the fact should be stated. The superintendent of the asylum from which the patient has been removed should also, in all cases, be informed as to the patient's mental condition at the close of the period of probation.

25. In the event of the death of a patient taking place during the currency of the probationary period, intimation should be at once sent to the asylum superintendent, with a medical certificate as to the cause of death.

Procedure for transferring a Pauper Lunatic from one Establishment to another.

26. A pauper lunatic may be transferred from one asylum to another, (a) by sanction of the Board, granted on petition to them by the Inspector of Poor, with one medical certificate from any registered practitioner who is not the medical officer or medical attendant of the asylum to which the patient is to be transferred, according to form B² (see list of Forms at page 150). Or (b) the patient may be transferred on the Sheriff's order, granted on two medical certificates according to Form A (see list of forms at page 150).

27. Patients who are detained in lunatic wards of poorhouses licensed for harmless and incurable patients only, cannot be transferred to asylums, or to those lunatic wards of poorhouses (parochial asylums) which are licensed for the reception and detention of patients suffering from all forms of insanity, except on the order of the Sheriff, granted by application on Form A.

28. The transfer of a pauper lunatic from any establishment for the insane to the lunatic wards of a poorhouse licensed for harmless and incurable patients only, must be effected by application to the Board on Form C (see list of forms at page 150).

29. The transfer of a pauper lunatic from an asylum to a training school for imbecile children, must be effected by application to the Board on Form M (see list of forms at page 150). In such a case *one* medical certificate will be

* It not infrequently happens that patients, soon after being discharged from asylums on probation, enter service, or engage otherwise in work which renders them self-supporting, or which places them in positions where visitation by parochial officials would be injurious to their interests. In such cases the Board do not desire that patients should be visited by medical officers or inspectors of poor, and it will often, in such circumstances, be desirable to obtain a certificate of recovery, when that can be done without injury to the patient, or to get the patient to transmit such a certificate, with a view to the connection with the asylum being brought finally to an end. Such certificates should be sent to the Board, and a copy transmitted to the asylum superintendent.

accepted as sufficient. Transfers from training schools to asylums must be effected by application to the Sheriff on Form A. Appendix D.

30. A patient out on probation from any asylum may be transferred during the currency of the probationary period to any other asylum by application to the Board on Form B² (see list of forms at page 150). Notice of the date of such transference should be given at once to the superintendent of the asylum from which the patient has been removed. Instructions
to Inspectors
of Poor.

Procedure for placing Pauper Lunatics in Private Dwellings under sanction of the Board, and Conditions of Sanction.

31. Pauper lunatics who do not require asylum treatment may, on becoming chargeable, remain in private dwellings under suitable guardianship, with the sanction of the Board, which is granted on the application of the Inspector of Poor, accompanied by *two* medical certificates, according to Form D (see list of forms at page 150).

32. Or they may be removed from establishments for the insane, and be placed under suitable guardianship in private dwellings under one or other of the procedures described in Rules 13-25. When the patient remains a pauper, application for the Board's sanction must be made in the manner described in Rule 16, page 141, after the patient has been discharged, and need not be accompanied by any medical certificate unless such be specially called for.

33. Not more than *one* pauper lunatic can be legally placed in any private dwelling unless the occupier of such dwelling hold a special license from the Board. This license is granted on application by the Inspector of Poor, in accordance with the regulations laid down in Appendix A, page 145.

34. The sanctions granted by the Board for the residence of lunatics in private dwellings, whether singly, or in numbers not exceeding four, are valid only for the particular house and the particular guardian named in the application. A pauper lunatic, whose residence in a private dwelling has been sanctioned, may, if need arises, be removed to another house or to other guardianship; but whenever any such patient is removed to another dwelling, or is placed under another guardian, the Inspector of Poor shall at once, after removal has taken place, intimate the facts to the Board, with a view to their sanction to the change being obtained (see Form H⁴ in list on page 150). Any alteration in the nature or amount of the parochial allowance shall also be at once reported to the Board by letter (see Rule 41).

35. Pauper lunatics sanctioned by the Board to live in private dwellings must be comfortably housed, sufficiently fed and clothed and otherwise suitably provided for. They must be placed under the charge of properly remunerated, efficient, and trustworthy guardians, whose duty it shall be to carry out carefully the Board's directions to persons receiving pauper patients, Appendix B, page 146.

36. Every pauper lunatic, whose residence in any private dwelling has been sanctioned by the Board, must be visited within three weeks after such sanction has been granted, and at least once every three months thereafter, by a medical man appointed to perform that duty by the Parish Council of the parish to which the lunatic is chargeable, unless the Board shall, on special application by the Inspector of Poor, otherwise regulate such visits; and the medical officer shall at every such visit enter in the visiting book for pauper patients in private dwellings (see list of forms at page 150), which shall be kept in the house in which the lunatic resides, a report of the mental and bodily condition in which he found the lunatic, with any suggestions or recommendations for improving the condition of the patient which he may think desirable. Any medical person who shall make any such entry without having visited the patient within seven days previous to such entry, is liable in a penalty not exceeding ten pounds for every such offence (section 13, 29 & 30 Vict. c. 51).

37. Suggestions or recommendations for improving a patient's condition, recorded by the medical officer, shall be at once reported by him to the Inspector of Poor of the parish to which the lunatic is chargeable, who shall either see that they receive immediate effect, or shall report to the Board his reasons for not carrying them out.

38. It shall be the duty of the Inspector of Poor of the parish to which an out-door lunatic is chargeable to visit the patient at least twice a year, and to record the visit on its proper page in the book in which the medical officer's

Appendix D.
 Instructions
 to Inspectors
 of Poor.

visits are recorded; and in the event of the lunatic residing beyond the parish to which he is chargeable, it shall be the duty of the Inspector of Poor of the parish of chargeability, if he does not visit the patient himself, to provide for his being visited by the Inspector of Poor of the parish of residence; in which case it shall be the duty of the inspector of the parish of chargeability to assure himself that these visits are regularly made and recorded.

39. If a pauper lunatic, whose residence in a private dwelling has been sanctioned by the Board, is regarded by them for any reason as having become unfit for residence in a private dwelling; or if any of the conditions as to accommodation, guardianship, treatment, or visitation is not observed, the Board may withdraw their sanction, and require the patient's removal to an asylum*; and any pauper lunatic who has been removed from an asylum and boarded out shall be sent back to it within fourteen days after the Inspector of Poor receives the order of the Board to that effect.

40. No pauper lunatic residing in any private dwelling shall be removed from the poor-roll unless by a minute of the Parish Council, or of a duly authorised committee thereof, and unless sufficient evidence be produced to the Parish Council or its committee that his care and treatment will be provided for in a manner which they regard as satisfactory. When a pauper lunatic who has been removed from an asylum is ordered by the Board to be sent back, the patient's relatives cannot remove his name from the poor-roll without the Board's sanction.

41. When a pauper lunatic in a private dwelling ceases to be chargeable as an out-door patient by recovery, death, removal from the poor-roll, or removal to an asylum* or other establishment for lunatics, or is removed to another house, or placed under another guardian, or when escape, or other serious occurrence happens, or when the alimentary allowance is increased or reduced, intimation thereof must be given to the Board within fourteen days. In making intimation of such occurrences, the following requirements should be kept in view:—

- (1) Notice of recovery (Form I) must be accompanied by a medical certificate of sanity.
- (2) Notice of death (Form I) must be accompanied by a statement of the cause of death.
- (3) Notice of removal from the poor-roll (Form I) must be accompanied by a copy of a Minute stating the reason for such removal.
- (4) Notice of removal to an establishment for lunatics should be given by a letter stating briefly the reason which made removal from private care necessary.
- (5) Notice of removal from one private dwelling to another, or from one guardian to another (Form H⁴) should be accompanied by a short statement of the cause which has made the change desirable.
- (6) Escapes, serious accidents, and other matters gravely affecting the well-being of patients, should be reported to the Board by the Inspector of Poor, by a letter giving particulars.
- (7) Changes of allowance should be reported by letter stating briefly the reason of the alteration.
- (8) A separate notice must be sent in the case of each patient.

Claims on the Contribution from the Local Taxation Account in aid of the Cost of Maintenance of Pauper Lunatics.

42. No claim for participation in the contribution from the Local Taxation Account in aid of the cost of maintenance of pauper lunatics will be allowed, unless the Board give a certificate that the patient has been necessarily detained and properly cared for in the place in which he was maintained during the period for which the claim is made.

43. A claim made on account of a pauper lunatic maintained in an establishment for the insane will be invalidated:—

1. If there is reason to believe that his mental or bodily health is injuriously affected by residence in the institution in which he is detained.
2. If his condition renders him unsuitable for treatment in the particular class of institution in which he is placed.

* When a patient is removed to an asylum, the usual Sheriff's order for reception is necessary.

3. If the Board shall be of opinion that he is detained in an establishment for the insane, notwithstanding that he could be satisfactorily provided for in a private dwelling, were reasonable efforts to find a proper guardian made by the Inspector of Poor, and adequate payment offered by the Parish Council. Appendix D.
Instructions to Inspectors of Poor.
4. Claims made on account of pauper lunatics maintained in private dwellings under the Board's sanction will be invalidated, in the event of any one of the following conditions not being complied with :—
1. They shall be comfortably housed, clothed, and fed.
 2. They shall be in every way as well treated as other members of the household.
 3. They shall receive such personal care and attendance as will insure their comfort and safety.
 4. Every reasonable effort shall be made to improve their condition and contribute to their happiness.
 5. The Inspector of Poor shall, unless the Board has regulated otherwise, make two visits yearly to each patient, and shall record them in the visiting book, as prescribed by the Board.
 6. A medical officer, appointed by the Parish Council shall, unless the Board has regulated otherwise, make four visits yearly to each patient, and shall record them in the visiting book, as prescribed by the Board.

(See Board's circular of 15th May 1879, Appendix, page 147.)

Approved,
THOS. D. GIBSON CARMICHAEL,
Chairman of the Board.

GENERAL BOARD OF LUNACY,
EDINBURGH, 6th November 1895.

Appendix A to foregoing Instructions.

REGULATIONS by the GENERAL BOARD OF LUNACY, under which SPECIAL LICENCES for the reception of not more than FOUR PAUPER LUNATICS are granted on the application of INSPECTORS OF POOR to the OCCUPIERS OF PRIVATE DWELLINGS.

I. The application for license must be made on Form F, and be signed by the Inspector of Poor of the parish to which the pauper lunatics to be accommodated are chargeable, and no pauper lunatic chargeable to any other parish shall be placed in a specially licensed private dwelling without the consent of the inspector on whose application the license was granted, which consent shall be intimated to the Board.

II. Not more than four pauper lunatics can be legally received into any specially licensed private dwelling ; but the Board will not grant a special license for the reception of more than *two* pauper lunatics into any such house except on the recommendation of a Commissioner or Deputy-Commissioner.

III. Each specially licensed private dwelling shall receive patients of one sex only, unless the Board shall in special circumstances sanction otherwise. A separate bed shall be available for every patient, and no patient above twelve years of age shall occupy a bedroom with an adult of the opposite sex.

IV. The occupier of every specially licensed private dwelling shall inform the visiting commissioner, medical officer, and inspector of poor, at their visits, of all lodgers who are living in the house, or who have been received into it since the previous visit. No lodger of the opposite sex from the patients, if above fourteen years of age, shall be received into any specially licensed private dwelling.

V. An Inspector of Poor, before removing a patient to a specially licensed house, shall assure himself that he is not by so doing infringing any of the special conditions of license as to the number and sex of patients, and that he is not encroaching upon the right in the house of any other inspector (see

Appendix D.
 Instructions
 to Inspectors
 of Poor.

Regulation I.). In other respects the procedure for removing patients to such houses, and for obtaining the Board's sanction, does not differ from that to be followed in providing for patients in private dwellings singly.

VI. All the rules and conditions as to visitation, care, and treatment, which apply to pauper lunatics provided for singly in private dwellings, are equally applicable to patients sanctioned to live in private dwellings which have been specially licensed.

VII. In all cases in which an Inspector of Poor has made provision for a pauper lunatic chargeable to his parish, in a specially licensed private dwelling not situated within such parish or within the statutory distance from it, he shall, if he does not himself undertake the duty of visitation, at once provide for his being regularly visited by the Inspector of Poor of the parish in which the pauper lunatic has been placed, as required by Rule 38 of the Board's Instructions to Inspectors of Poor (1895).

VIII. The Board would at the same time strongly urge upon Inspectors of Poor the propriety of themselves visiting periodically all lunatics chargeable to their parishes who may be boarded out in specially licensed private dwellings, wherever such houses may be situated, in order to satisfy themselves of the efficiency of the guardianship and of the continued fitness of the lunatic for residence in such a house ; the date and particulars of such visits, as well as of the visits paid by the local inspector, should be duly recorded in the visiting book provided for the purpose. In all cases where a number of specially licensed private dwellings are situated in the same locality, the Board will consider it necessary to insist upon periodical visits by the Inspector of Poor of the parish of settlement, and they would in such cases also strongly recommend visitation by a committee of the Parish Council.

IX. Special licenses may be cancelled at any time, for any reason which the Board shall deem sufficient. Whenever an Inspector of Poor at whose instance a special license has been obtained discontinues his connection with the house, the fact should be reported to the Board with any observations which seem desirable.

Appendix B to foregoing Instructions.

DIRECTIONS to Persons receiving PAUPER PATIENTS into PRIVATE DWELLINGS with the sanction of the General Board of Commissioners in Lunacy.

Bedding and Sleeping Rooms.

Guardians shall see that the sleeping room occupied by a patient is free from damp and well ventilated, that the bed is comfortable, and that the bed coverings are suitable and sufficient.

Clothing.

They shall take care that every patient is furnished with at least one full change of clothing, and they shall keep all articles of clothing clean and in good repair. A separate box or drawer should be set apart for the clothing of each patient, so that it may be readily inspected by the Commissioners in Lunacy, local Medical Officers, and Inspectors of Poor.

Cleanliness.

The Guardians shall attend strictly to the personal cleanliness of every patient under their care ; much importance is attached to this requirement.

Food.

They shall take their meals along with the patients and at the same table, and they shall supply them with the same kind of food as they take them-

selves, unless the Medical Officer shall decide otherwise. The food must always be sufficient in quantity, of good quality, and carefully cooked. Appendix D.

Occupation and Exercise.

Instructions
to Inspectors
of Poor.

The Guardians shall do all they can to get the patients to employ themselves in work suited to their training and ability ; but they shall at the same time be careful not to overtask those who are inclined to be industrious. It is desirable that every patient who is fit for it should have out-door exercise every day when the weather is suitable.

General Treatment.

They shall, as much as possible, treat the patients as members of their own families, and shall do all that they can to protect them from harm, and to improve their health and increase their happiness. Patients should be encouraged to attend Divine Service.

Medical Care.

They shall at once call in the local Medical Officer, and carefully follow his instructions, in the event of bodily illness or accident, or of any marked change being apparent in the mental condition of a patient.

Accidents, Escapes, etc.

In addition to calling in medical aid, as required by the preceding Direction, they shall immediately report to the Inspector of Poor, with a view to his intimating the facts to the Board, all serious accidents to patients, all untoward occurrences affecting their well-being, and all cases in which patients have without leave gone away from their Guardians' care.

Visits by Officials.

They shall carefully keep in a readily accessible place the book in which the local Medical Officers and the Inspectors of Poor record their visits, and they shall take care to bring under the notice of these officials all matters which concern the comfort of a patient, or the fitness of a patient for a private dwelling.

Appendix C to foregoing Instructions.

- (1) CIRCULAR LETTER TO INSPECTORS OF POOR regarding the CONDITIONS on which CLAIMS on the PARLIAMENTARY GRANT (now Contribution from Local Taxation Account) in aid of the cost of maintenance of Pauper Lunatics are admitted in the case of patients provided for in PRIVATE DWELLINGS.

GENERAL BOARD OF LUNACY,
EDINBURGH, 15th May 1879.

SIR,—With reference to the Parliamentary Grant in aid of the cost of maintenance of Pauper Lunatics, I am instructed by the Board to call your attention again to the following points :—

If, in regard to all Pauper Lunatics provided for in Private Dwellings, the following requirements are not fully complied with, the claim of the parish to which such Pauper lunatics are chargeable to share in the Grant will be invalidated:—

1. They shall be comfortably housed and fed.
2. They shall be in every way as well treated as other members of the household.
3. They shall receive such personal care and attendance as will insure their comfort and safety.
4. Every reasonable effort shall be made to improve their condition and contribute to their happiness.

Appendix D.
Instructions
to Inspectors
of Poor.

5. The Inspector of Poor shall make two visits yearly to each patient, and shall record them in the Visiting Book, as prescribed by the Board.
6. A medical officer, appointed by the Parochial Board, shall make four visits yearly to each patient, and shall record them in the Visiting Book, as prescribed by the Board.

To insure the comfort of the patients, it is necessary not merely that a sufficient remuneration should be given to those who have charge of them, but also that the Inspector of Poor and the Medical Officer satisfy themselves that the duties of the guardians are well performed. Improper treatment, neglect of a patient, or an inadequate supply of food or clothing, although the fault may rest rather with the person under whose immediate charge the patient is placed than with the Parochial Officials, will invalidate the claim of the parish to share in the Grant.

I am instructed to draw your particular attention again to these points, because, notwithstanding my Circular of 9th January 1878 upon this subject, statements are still made by Inspectors of Poor and Parochial Medical Officers that they do not understand these to be conditions on which the Grant depends.—I am, etc.,

W. FORBES, *Secretary.*

The Inspector of Poor is requested to place a copy of this Circular in the hands of every Medical Officer to whom may be entrusted the duty of visiting Pauper Lunatics not in Asylums. Additional copies may be had on application.

(2) CIRCULAR LETTER TO INSPECTORS OF POOR regarding the
TRANSMISSION OF FEMALE PATIENTS to and from ASYLUMS.

GENERAL BOARD OF LUNACY,
EDINBURGH, 6th January 1880.

SIR,—The Board have had under consideration the practice pursued in the transmission of female patients to and from asylums, and I am to state that the Board trust you will regard it as your duty to provide that a female patient, when taken to or from an asylum, shall be accompanied by a person of her own sex.

The Board are aware that in some cases, such, for instance, as might arise from the patient being accompanied by her husband or son, female attendance may properly be dispensed with. But even in these circumstances, if the patient is excited or violent, or if the services of a nurse would be of use, female attendance should be regarded as necessary.

The Board think it right to indicate their views in this matter, and they do not doubt that you will give them careful consideration, and do what is proper in each case.—I am, etc.,

W. FORBES, *Secretary.*

(3) CIRCULAR LETTER TO INSPECTORS OF POOR regarding the TRANS-
MISSION to the Board, of NOTICES required to be sent under the
Lunacy Acts.

GENERAL BOARD OF LUNACY,
EDINBURGH, 6th December 1883.

SIR,—With a view to diminishing as far as possible the work imposed upon Inspectors of Poor through the notices required to be sent under the provisions of the Lunacy Acts, the Board have carefully considered whether some notices at present transmitted by Inspectors of Poor might not properly be dispensed with, in view of the fact that the Board receive from other sources sufficiently full information of the occurrences to which these notices relate.

As the result of that consideration they have determined that they will not in future require the transmission of the following notices referring to pauper lunatics in asylums, in lunatic wards of poorhouses, and in training schools for imbecile children :—

- (1) Notice of recovery.
- (2) Notice of death.
- (3) Notice of transfer from one establishment to another.

The Board trust, however, that you will be careful to continue to transmit the following notices referring to lunatics in asylums, poorhouse wards, and training schools :—

Appendix D.
Instructions
to Inspectors
of Poor.

- (1) Notice of removal from poor-roll of unrecovered patients, whether discharge from the establishment takes place or not (Form I).
- (2) Notice of Removal from establishments to private dwellings of unrecovered patients who are to continue in receipt of relief (Form H⁴).

The Board also hope that it will be clearly understood that what has been said above in no way obviates the necessity for sending the following notices referring to patients residing under their sanction in private dwellings, including specially licensed houses, and they trust you will bear in mind that the neglect to send such notices both renders it impossible to keep correctly the General Register prescribed by the statute, and entails upon the Board's Visiting Officers needless trouble and expense :—

- (1) Notice of death of a patient sanctioned to reside in a private dwelling, with a statement of cause (Form I).
- (2) Notice of recovery of a patient sanctioned to reside in a private dwelling, with a medical certificate of recovery (Form I).
- (3) Notice of removal from the poor-roll of a patient sanctioned to reside in a private dwelling, with a copy of minute of Parochial Board authorising removal (Form I).
- (4) Notice of removal to an establishment of a patient sanctioned to reside in a private dwelling (notice by letter).
- (5) Notice of removal of a patient from one private dwelling or specially licensed house to another, or from one guardian to another (Form H⁴).

The Board also trust that Inspectors of Poor will continue to be careful to send the following general notices :—

- (1) Intimation of a pauper lunatic (Form I¹).
- (2) Transference of Liability of a pauper lunatic from one parish to another (Form I).

I am, etc.,

W. FORBES, *Secretary.*

- (4) LETTER TO THE SECRETARY OF THE BOARD OF SUPERVISION, in regard to ASSISTANCE by the CONSTABULARY in REMOVING DANGEROUS LUNATICS.

GENERAL BOARD OF LUNACY,
EDINBURGH, 8th April 1889.

SIR,—The Board have had before them the documents accompanying your letters of the 4th February and 16th March, as to the duty of the Constabulary in apprehending and removing dangerous lunatics to asylums; and, with reference thereto, I am directed by them to say that, in their opinion, it is not desirable that the police should interfere in cases of lunacy unless such interference is clearly necessary for the lunatic's own protection, or that of others. On the other hand, whenever there is a reasonable ground for believing that there is danger in the conduct of an insane person, it is clear that the lieges are entitled to expect the protection of the police. Such protection would not necessarily imply the apprehension of the lunatic, for cases might occur in which watchfulness on the part of the police, or assistance by them in enabling relatives or parochial authorities to make the necessary arrangements for the lunatic's safety, might be all that would be needed. The interference of the police beyond that point might, in many cases, be productive of more harm than good. It is clearly undesirable that harmless persons should, merely because of insane behaviour, be dealt with by the police, and be thus associated in the public mind with persons who have acted criminally.

There may, however, often be considerable difficulty and difference of opinion as to whether the conduct of an insane person is such as infers danger or not. There can be no rule laid down upon this subject, and much must be left to the good sense of those concerned. If there is a desire on the part of the parochial and of police authorities, as the Board believe is generally the case throughout Scotland, to be mutually helpful and considerate to each other in dealing with insane persons, the Board think that the safety of patients

Appendix D.
—
Instructions
to Inspectors
of Poor.

and of the public will be amply secured without the action of the police authorities becoming unduly prominent, and without any hard and fast regulation being made on the subject.

In most cases where patients have to be removed to asylums by parochial authorities, the Board believe that these authorities do not require to call on the police for assistance, and they should refrain from doing so unnecessarily. On the other hand; whenever there is reason to believe that an insane person is a source of danger, and the means of removal at the disposal of the parochial authorities are inadequate the Board think that it would be advantageous that the police should not withhold such assistance as may be necessary to provide fully for the protection of the patient and those about him.

I return herewith the documents forwarded.—I am, etc.,

(Signed) T. W. L. SPENCE,
Secretary.

JOHN SKELTON, Esq., C.B.,
Secretary, Board of Supervision.

Appendix D to foregoing Instructions.

- (1) FORMS REQUIRED BY INSPECTORS OF POOR in the disposal of Pauper Lunatics. They are furnished by Messrs T. & A. Constable, Printers, 11 Thistle Street, Edinburgh. (See Circular on page following, and also Circular on page 148.)

FORM	Price per Dozen.	Postage per Dozen.
(A). Petition to the Sheriff to grant order for the reception of a patient into an Asylum,	9d.	1½d.
(B ²). Application to the General Board of Lunacy to sanction transfer of a patient from one Asylum to another,	8d.	1d.
(C). Application to the General Board of Lunacy to sanction the reception of a pauper lunatic into the Lunatic Wards of a Poorhouse,	9d.	1½d.
(D). Application to the General Board of Lunacy to sanction the residence of a pauper lunatic in a private dwelling, specially licensed or otherwise,	9d.	1½d.
(F). Application to the General Board of Lunacy to grant a special license authorising the residence in a private dwelling of more than one pauper lunatic,	8d.	1d.
(G). Application to the General Board of Lunacy to sanction the liberation on probation of a lunatic,	8d.	1d.
(H ⁴). { Notice of removal from an asylum of an unrecovered pauper lunatic, not removed from the poor-roll, or	5d.	½d.
{ Notice of change of residence or guardianship of a pauper lunatic sanctioned to reside in a private dwelling,	5d.	½d.
(I). Notice that a pauper lunatic has ceased to be chargeable by transference of liability, removal from poor-roll, recovery, or death,	5d.	½d.
(I ¹). Intimation of a pauper lunatic,	5d.	½d.
(M). Application to the General Board of Lunacy, to sanction the reception of a pauper child into a training school for imbecile children,	8d.	1d.
Visiting book for pauper patients in private dwellings,	6d. each, or 7d. with Postage.	

- (2) CIRCULAR No. 90 as to FORMS, BOOKS, ETC., not obtained from BOARD'S PRINTERS.

GENERAL BOARD OF LUNACY,
EDINBURGH, 17th August 1888.

Appendix D.

Instructions
to Inspectors
of Poor.

SIR,—I am directed by the Board to inform you that all Schedules, Notices, Books, and Registers required in connection with the Lunacy Statutes are issued by Messrs T. & A. Constable, Printers, 11 Thistle Street, Edinburgh, under the Board's direction, and that by an arrangement with Messrs Constable all such Schedules, Notices, Books, and Registers are submitted to the Board for Revision and for such alteration as may be thought desirable, on each occasion on which it becomes necessary to print a fresh supply for public use.

In the event, therefore, of your purposing at any time to get any of these forms printed privately, or by printers other than Messrs Constable, the Board request that you will, before doing so, obtain from Messrs Constable a copy of the form proposed to be printed, so as to insure that all changes made by the Board are embodied in the reprint.—I am, etc.,

(Signed) T. W. L. SPENCE.

Appendix E to foregoing Instructions.

ASYLUMS AND LUNATIC WARDS OF POORHOUSES provided for the Pauper Lunatics of the different Counties, as in the year 1895.

COUNTIES.	ACCOMMODATION FOR PAUPER LUNATICS.
ABERDEEN.	<p><i>Aberdeen Royal Asylum.</i>—Receives patients of all kinds and from any parish in the county.</p> <p><i>Aberdeen East Poorhouse Lunatic Wards.</i>—For harmless and incurable patients of the parish of Aberdeen.</p> <p><i>Aberdeen West Poorhouse Lunatic Wards.</i>—For harmless and incurable patients of the parish of Aberdeen.</p> <p><i>Buchan Combination Poorhouse Lunatic Wards, New Maud.</i>—For harmless and incurable patients of the parishes forming the Combination.</p>
ARGYLL.	<p><i>Argyll and Bute District Asylum, Lochgilphead.</i>—Receives all the pauper patients of the county who require asylum treatment.</p>
AYR.	<p><i>Ayr District Asylum.</i>—Receives all the pauper patients of the county who require asylum treatment.</p> <p><i>Cunninghame Combination Poorhouse Lunatic Wards, Irvine.</i>—For harmless and incurable patients of the parishes forming the Combination.</p>
BANFF.	<p><i>Banff District Asylum.</i>—All the pauper patients of the county who require asylum treatment are sent to this Asylum.</p>

Appendix E.
—
Instructions
to Inspectors
of Poor.

COUNTIES.	ACCOMMODATION FOR PAUPER LUNATICS.
BERWICK.	<i>Roxburgh District Asylum, Melrose.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
BUTE.	<i>Argyll and Bute District Asylum, Lochgilphead.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
CAITHNESS.	<i>Montrose Royal Asylum.</i> —All the patients of the county who require asylum treatment are sent to this Establishment.
CLACKMANNAN.	<i>Stirling District Asylum, Larbert.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
DUMBARTON.	<i>Stirling District Asylum, Larbert.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum. <i>Dumbarton Combination Poorhouse Lunatic Wards.</i> —For harmless and incurable patients of the parishes forming the Combination.
DUMFRIES.	<i>Crichton Royal Institution, Dumfries.</i> —All the pauper patients of the county who require asylum treatment are sent to this Establishment.
EDINBURGH or MIDLOTHIAN.	<i>Edinburgh Royal Asylum.</i> —This Establishment receives all kinds of patients belonging to the Urban District of Edinburgh, which comprises the parishes of Edinburgh, Leith, and Duddingstone. <i>Midlothian and Peebles District Asylum, Roslin.</i> —All pauper patients who require asylum treatment from those parishes of the county not included in the Urban District of Edinburgh, may be sent to this Asylum. <i>Edinburgh City Poorhouse Lunatic Wards, Craiglockhart.</i> —For harmless and incurable patients belonging to the parish of Edinburgh. <i>Inveresk Combination Poorhouse Lunatic Wards, Musselburgh.</i> —For harmless and incurable patients of parishes forming the Combination.
ELGIN.	<i>Elgin District Asylum.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.

COUNTIES.	ACCOMMODATION FOR PAUPER LUNATICS.
FIFE.	<i>Fife and Kinross District Asylum, Cupar.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
FORFAR.	(1) <i>Dundee Royal Asylum</i> ; and (2) <i>Montrose Royal Asylum.</i> —Patients of all kinds and from any parish in the county may be sent to either of these Establishments. <i>Dundee East Poorhouse Lunatic Wards.</i> —For harmless and incurable patients of the parish of Dundee. <i>Dundee West Poorhouse Lunatic Wards.</i> —For harmless and incurable patients of the parish of Dundee.
HADDINGTON.	<i>Haddington District Asylum.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum. <i>Inveresk Combination Poorhouse Lunatic Wards, Musselburgh.</i> —For harmless and incurable patients of the parishes forming the Combination.
INVERNESS.	<i>Inverness District Asylum.</i> —All the pauper patients in the county who require asylum treatment are sent to this Asylum.
KINCARDINE.	<i>Montrose Royal Asylum.</i> —All the patients of the county who require asylum treatment are sent to this Establishment. <i>Kincardineshire Combination Poorhouse Lunatic Wards, Stonehaven.</i> —For harmless and incurable patients of the parishes forming the Combination.
KINROSS.	<i>Fife and Kinross District Asylum, Cupar.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
KIRKCUDBRIGHT.	<i>Crichton Royal Institution, Dumfries.</i> —All the pauper patients of the county who require asylum treatment are sent to this Establishment.
LANARK.	<i>Lanark District Asylum at Hartwood, Lanarkshire.</i> —Receives all pauper patients of parishes of Lanarkshire, other than those of Barony, City of Glasgow, and Govan. <i>Hamilton Combination Poorhouse Lunatic Wards.</i> —Receives harmless and incurable patients of the parishes forming the Combination.

Appendix D.

Instructions
to Inspectors
of Poor.

COUNTIES.	ACCOMMODATION FOR PAUPER LUNATICS.
	<p><i>Old Monkland Poorhouse Lunatic Wards, Coatbridge.</i>—Receives harmless and incurable patients of the parish of Old Monkland.</p> <p><i>Kirklands Asylum, Bothwell (Temporary Asylum).</i>—Receives pauper patients from all the parishes of Lanarkshire except Barony.</p> <p><i>Barony Poorhouse Lunatic Wards (Barony Parochial Asylum), Woodilee, Lenzie.</i>—Receives all pauper patients of the Barony parish.</p> <p><i>City of Glasgow District Asylum at Gartloch, Glasgow.</i>—Receives all pauper patients of Glasgow City parish.</p> <p><i>Govan District Asylum at Hawkhead, Paisley.</i>—Receives pauper patients of all kinds of Govan parish.</p> <p><i>Govan Poorhouse Lunatic Wards, Merryflatts, Glasgow.</i>—Receives harmless and incurable patients belonging to Govan parish.</p>
LINLITHGOW.	<p><i>Stirling District Asylum, Larbert.</i>—All the pauper patients of the county who require asylum treatment may be sent to this Asylum.</p> <p><i>Linlithgow Combination Poorhouse Lunatic Wards.</i>—For harmless and incurable patients of the parishes forming the Combination.</p>
NAIRN.	<p><i>Inverness District Asylum.</i>—All the pauper patients of the county who require asylum treatment are sent to this Asylum.</p>
ORKNEY.	<p><i>Edinburgh Royal Asylum.</i>—All the patients of the county who require asylum treatment may be sent to this Establishment.</p>
PEEBLES.	<p><i>Midlothian and Peebles District Asylum, Roslin.</i>—All the pauper patients of the county who require asylum treatment are sent to this Asylum.</p>
PERTH.	<p><i>Perth District Asylum, Murthly.</i>—All the pauper patients of the county who require asylum treatment are sent to this Asylum.</p> <p><i>Perth Poorhouse Lunatic Wards.</i>—For harmless and incurable patients of the parish of Perth.</p>

COUNTIES.	ACCOMMODATION FOR PAUPER LUNATICS.
RENFREW.	<p><i>Lunatic Wards of Paisley Poorhouses at Riccartbar and Craw Road (Parochial Asylums).—</i>Pauper patients of all kinds are sent to these Establishments from Paisley parish, and other parishes in the county with which contracts have been made.</p> <p><i>Greenock Poorhouse Lunatic Wards (Greenock Parochial Asylum).—</i>Pauper patients of all kinds are sent to this Establishment from Greenock parish, and other parishes in the county with which contracts have been made.</p>
ROSS.	<i>Inverness District Asylum.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
ROXBURGH.	<i>Roxburgh District Asylum, Melrose.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
SELKIRK.	<i>Roxburgh District Asylum, Melrose.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
SHETLAND.	<i>Montrose Royal Asylum.</i> —All the pauper patients of the county who require asylum treatment may be sent to this Asylum.
STIRLING.	<i>Stirling District Asylum, Larbert.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
SUTHERLAND.	<i>Inverness District Asylum.</i> —All the pauper patients of the county who require asylum treatment are sent to this Asylum.
WIGTOWN.	<p><i>Urichton Royal Institution, Dumfries.</i>—All the pauper patients of the county who require asylum treatment are sent to this Establishment.</p> <p><i>Wigtownshire Combination Poorhouse Lunatic Wards, Stranraer.</i>—For harmless and incurable patients of the parishes forming the Combination.</p>

Appendix D.
Instructions
to Inspectors
of Poor.

NOTE.—The following are training schools for imbecile children which receive pauper pupils :—

BALDOVAN INSTITUTION, near Dundee.

LARBERT INSTITUTION, at Larbert.

Children may be sent to them from any part of the country.

APPENDIX E.

Appendix E.

CIRCULAR ISSUED TO SUPERINTENDENTS OF ASYLUMS REGARDING THE RECORD OF RESTRAINT AND SECLUSION AND CALLING FOR QUARTERLY RETURN.

GENERAL BOARD OF LUNACY,
EDINBURGH, 13th December 1895.

To the Superintendent of

SIR,—I am directed by the Board to refer you to their Circular, No. 92, of 20th September 1889, regarding entries in the Register of Restraint and Seclusion, and to say that they trust it will be understood that the use of all such appliances as the wet or dry pack falls within the definition of Restraint as contained in that Circular.

I am further directed by the Board to request :—

- (1) That whenever a patient is placed in a bath having a lid with an aperture for the head (a case which is not covered by the definition referred to), the use of such a bath may in future be regarded as Restraint, and registered accordingly ;
- (2) That no patient be placed in Restraint or Seclusion unless on the order of a Medical Officer, who (a) should see the patient before the order is given, (b) should regard the order as requiring renewal daily so long as Restraint or Seclusion is employed; and (c) should assure himself by inspection during its continuance that the patient is not being injuriously affected by it ;
- (3) That a copy of all Entries in the Register of Restraint and Seclusion be transmitted to the Board within seven days after the expiry of each quarter, reckoning the first quarter to which the Rule applies as beginning at 1st January next. If no entry occurs in the Register during the quarter, it is requested that a statement to that effect be made.

The Board desire to impress upon Superintendents the necessity for daily, accurate, and full entries of every case in which Restraint or Seclusion has been employed.—I am, Sir, Your obedient Servant,

T. W. L. SPENCE,
Secretary.

APPENDIX F.

CIRCULAR LETTER TO INSPECTORS OF POOR RESTRICTING THE GROWTH OF THE NUMBER OF PATIENTS IN PRIVATE DWELLINGS IN CERTAIN PARISHES OF FIFE-SHIRE. Appendix F.

GENERAL BOARD OF LUNACY,
EDINBURGH, 27th January 1896.

To the Inspector of Poor.

SIR,—I am directed by the Board to inform you that they are of opinion that it is inadvisable at present to increase the number of patients boarded in certain parishes in Fifeshire, and that they will not sanction any addition to the number already in the parishes after-named, except in the case of patients chargeable to these parishes, or to neighbouring parishes, or who have a family or residential connection with such parishes. But it will be understood that a Parish Council may send patients to any of the parishes named, to make up a reduction from any cause of the number of their patients at present in the parish. In filling such vacancies, the Board trust that great care will continue to be taken to select patients whose conduct will not be likely to give any ground for public complaint.

The following is a List of the Parishes which fall under this restriction, including the parishes of Kennoway and Collessie, to which it had previously been applied—

Collessie
Auchtermuchty
Strathmiglo
Falkland
Kettle

Markinch
Kennoway
Wemyss
Kilconquhar
Leuchars

I am, Sir, Your obedient Servant,

T. W. L. SPENCE,
Secretary.

